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ABSTRACT

The report describes the intent and accomplishments of a project designed to develop a system for increasing the level of parents' involvement in their handicapped child's education program. To identify factors related to parents' involvement in specific types of parent programs and activities, the Parent Needs Assessment Inventory (PNAI) was developed. The PNAI consisted of four instruments measuring family background data, feelings about having a handicapped child, involvement in the community, and educational program ratings. A recording system was also devised to determine level of parent involvement in parent activities and programs. Using data from the PNAI, profiles of parents were established for those likely to be or not likely to be involved in the following specific program options: parent counseling, parent-provided programs, parent education, and direct participation programs. Field test data on the PNAI are reported for 208 families, as are profile analyses. Findings suggested that family involvment is related more to program design than to noneducational family background variables. Extensive appendixes, which include documentation of project activities, correspondence, and assessment tools, comprise more than half of the document. (CL)

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Developing Individualized Parent Participation Programs (IPPP)

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Final Report

September 1, 1983 - August 31, 1984

Grant #G008300318

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Developing Individualized Parent Participation Programs (IPPP)

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Table of Contents

Introduction	1
Statement of the problem	1
Purpose of the Project	1
Project Objectives	2
Procedures	5
Site and Subject Selection	5
Project Activities	7
Findings	13
Descriptive PNAI Analysis	13
Profile Data	32
Recommendations for Further Study	37
Reference List	40
Appendices	
Appendix A: Advisory Board Members	42
Appendix B: Advisory Board Meeting Minutes	46
Appendix C: Documentation of Colaboration with TPS/EC Staff	55
Appendix D: Documentation of Search for Assessment Tools	76
Appendix E: Documentation of Local Search Activities	82
Appendix F: Documentation of Search at Conferences	86
Appendix G: Assessment Tool Resource File	89
Appendix H: Letters of Permission	99
Appendix I: Revised Parent Needs Assessment Inventory	102
Appendix J: Correspondence with TPS/EC Families	109

List of Tables

Table 1 - Responses to Family Background Survey 16

Table 2 - Frequency and Percentage of Responses to Items on Program Satisfaction Survey 25

Table 3 - Frequency and Percentage Responses to Involvement in Community Resources Survey 27

Table 4 - Frequency and Percentage of Responses to Feelings About Having a Handicapped Child Survey 29

Table 5 - A comparison of Percentage Scores Found to Discriminate Involvement 34

Introduction

Statement of the Problem

Local educational agencies across the country have provided various types of involvement opportunities for parents. Unfortunately, parent attendance at, and participation in these programs often has been less than desirable. In fact, this lack of active parent participation has been cited repeatedly as a major professional concern (Morgan, 1982; Turnbull & Strickland, 1981; and Cutler, 1981).

An obstacle to active parent participation has been a lack of professional awareness regarding the importance of considering each parent's individual needs. Although professionals have recognized the necessity of viewing each handicapped child on an individual basis, it is only recently that the individuality of parents has been considered critical to effective program implementation (Shell & Dunkle, 1979). As a result, today's professionals are faced with a dilemma. On one hand, they recognize the importance of involving parents, even those who resist attempts to be involved (Schultz, 1982). On the other hand, little, if any, direction is cited on methods to increase each parent's level of participation.

Purpose of the Project

In order to develop a system which can be tapped by professionals in local educational agencies to assure that parent programs are appropriate for individual families and are realistic in terms of a given parent's ability to participate, it is necessary to focus attention on the individuality of parents. The purpose of the Individualized Parent Participation Program (IPPP) was to develop an organized system for planning and implementing programs which have the potential to increase the level of parent's involvement in their handicapped child's educational program.

The first step in developing a realistic IPPP is to identify barriers to, as well as variables associated with, involvement in various types of parent programs and activities. This information is needed to assist professionals in identifying the needs of each family and, as a result, help them select the most appropriate parent program option available on an individual basis. Although lack of transportation, perceptions of nonequal status in relation to professionals, and a lack of knowledge, have been cited as barriers to parents assuming an active role in their child's program (Golin & Duncanis, 1981; Gleidman & Roth, 1981; Seligman, 1979; and Walker, 1979), a system which assists professionals in selecting program options on the basis of each family's needs is not available.

In order to increase individualized parent involvement, the IPPP Project identified three specific needs.

1. A measurement tool designed to identify appropriate information related to parent involvement must be developed

2. Characteristics of parents at various levels of involvement in specific program options must be identified to assist professionals in determining the most realistic initial program placement (e.g., if a parent is identified as not having reliable transportation and does not feel acceptance in a formal program setting, then the professionals might recommend an initial parent program which meets outside the school and which offers volunteer transportation services.

3. Guidelines for using such measurement tools and concrete activities that professionals might employ to enhance parent participation must be developed.

Project Objectives

The IPPP Project was designed to assist professionals in identifying factors related to parent involvement and to assist professionals in

developing procedures for promoting such involvement. In order to implement an IPPP for each family involved with a handicapped child, an organized system, which identifies the needs of these families, is critical. The IPPP Project objectives discussed below are steps in reaching the intended goal--the development of a system to meet the individual needs of families with handicapped children--and thus promote more effective parent involvement.

1. The Parent Needs Assessment Inventory will be designed to identify factors related to parents' involvement in specific types of parent programs and activities.

Here the focus is on developing a comprehensive instrument package; i.e., the Parent Needs Assessment Inventory, that includes a wide range of items identified as related to parent involvement. Item content will be developed from current research data related to parent involvement and from expert opinion.

2. Profiles of parents more likely to participate in progarms or activities will be developed to assist professionals in determining which activities or levels of involvement are more realistic for each family member within any given family.

By using the Parent Needs Assessment Inventory developed in the above objective, responses from families eligible for participation in a variety of parent programs could be analyzed. Here the emphasis is on identifying what factors are related to involvement in specific types of parent programs (parent education, direct participation, parent counseling and/or parent-provided programs). As a result, characteristics of parents who are involved, or not involved, in specific kinds of programs could be made.

3. IPPP Project findings and procedures for developing IPPP's will be disseminated to assist professionals in recognizing the importance of considering the individuality of each family and to provide them with guidelines

for developing an IPPP. One vehicle for disseminating this information is a manual which includes (a) an overview of various types of parent programs and examples of each type, (b) instruments developed by this project which will help professionals collect information necessary to select realistic program options for parents, and (c) IPPP forms and guidelines for their joint use by professionals and parents.

Data from this project also should be valuable to professionals involved in applied research activities related to the roles of parents involved with handicapped children, since its focus extends beyond the IEP meeting--an area often overlooked in the research. Thus, findings from this project will be submitted to appropriate professional journals.

Procedures

Site and Subject Selection

The development of appropriate needs assessment instruments and parent profiles related to an array of parent participation programs requires the involvement of a large number of parents who are eligible to participate in varous types of existing programs and activities. The IPPP Project involved parents whose children are enrolled in the Toledo Public Schools/ Early Childhood (TPS/EC) program as the source for data collection. The justification for using the TPS/EC population rests on several important factors:

1. TPS/EC program is comprehensive in that it serves families with young children identified as having a wide range of handicapping conditions including the hearing-impaired, orthopedically handicapped, visually impaired, severe/multi-impaired, and the developmentally delayed. Some research indicates that parent involvement may possibly be linked to type of impairment, thus it is necessary that parents involved with various handicapping conditions participate in this project.

2. The literature indicates that many types of parent programs and activities are available to parents. However, most of these options can be grouped into four different categories (LaCrosse, 1982). These are: parent education, direct participation, parent counseling and parent-provided programs.

A parent education program is basically an information-giving service. While parent eduaction programs may take a variety of forms and cover different materials, information included in most parent education programs falls into the following categories: what to expect from a conference, how to participate in planning, information on normal child growth and

development, specific knowledge about a child's disability, community resources, and skills to provide the special care needed by the child.

A direct participation program refers to the involvement of parents as partners with professionals in the delivery of educational programs for their child. One of the new approaches to direct participation emphasizes working with child and parent together and focuses on improving parent-child interaction rather than working with either the child or parent alone.

The purpose of parent counseling programs is to assist parents in dealing effectively with the stressful emotions and physical demands often experienced by families of handicapped children. Parents of handicapped children typically experience an array of negative emotions including disappointment, fear, anxiety, anger, helplessness, pain, disbelief, shock, self-pity, resentment and confusion. Some indicators of the success of parent counseling programs are: parent satisfaction, the degree to which recommendations are followed, the ability of parents to cope with the overall adjustment of having a handicapped child in the family, the degree to which the needs of the rest of the family are filled, the parents' own adjustment or readjustment to life, the ability to discuss the problems and the realism of the content of that discussion.

Parent-provided programs include such options as parent organizations, parent-to-parent programs and parents as advocates. Through parent-provided programs, parents of handicapped children can obtain moral support, information and a new perspective by involving themselves with other parents who have had, or are having, similar experiences.

The TPS/EC program offers parents of handicapped children opportunities to participate in an array of parent activities and programs including options in each of the four different categories just described. Opportunities

for parents to participate in many types of activities and programs are necessary in order to develop profiles of parents most likely to participate in any given type of related activity or program.

Project Activities

The following activities were completed as the means of reaching the stated objectives of the IPPP Project.

1. Establishment of a Parent-Professional Advisory Board. An advisory board was established for the purpose of providing a comprehensive view of the issues and proposed activities of the IPPP Project. Advisory Board members were actively involved in all phases of the project. They especially played a critical role in evaluating each project activity.

Membership on the advisory board included two parents of disabled children (one presently enrolled in the TPS/EC program), professionals working with the parent education component of the early childhood project, and representatives of various community agencies (such as Head Start) generally involved in working with parents. (See Appendix A for a list of board members and their affiliations.)

While the Advisory Board met every two months, input from board members was solicited on an "as needed" basis. Specific activities in which board members were involved include:

(a) making suggestions on content and format of the data collection instrument package;

(b) analyzing the proposed procedures for developing individualized parent participation programs;

(c) reviewing the proposed outline for the professionals' handbook;

(d) reacting to the recommendations made by project staff regarding dissemination efforts designed to increase professional awareness of, and skill in, individualizing parent participation programs. (Refer to Appendix B for a detailed copy of Advisory Board meeting minutes.)

2. Development of a level of parent involvement observation/recording system. To determine the level of parent involvement in all parent activities and programs throughout the 1983-84 school year, Toledo Public Schools/ Early Childhood (TPS/EC) professionals and paraprofessionals who worked in these programs used a uniform observation/recording system. The recording system and forms used to document involvement were developed on the basis of each programs' needs. The TPS/EC professionals, as well as the paraprofessionals, evaluated and field tested the appropriateness of the observation/recording system designed by project staff to monitor level of involvement.

Throughout the data collection phase (October to December and January to May) several topical meetings were held with the TPS/EC staff. The IPPP site coordinator met with TPS/EC staff throughout the week on an "as needed" basis. A detailed documentation of meetings with the professional and paraprofessional staff and the topics of these meetings are presented in Appendix C.

3. Development of a Parent Needs Assessment Inventory. The purpose of the Parent Needs Assessment Inventory is to identify factors related to parents' decisions regarding their involvement, or lack of involvement, in various parent programs and activities available to them. This information serves two purposes. First, it is needed to develop level of involvement profiles; i.e., involvement versus noninvolvement of parents in varous types of parent activities and programs. In addition, the Parent Needs Assessment Inventory serves as a means to assist professionals in identifying realistic individualized program options for parents of handicapped children.

Items included on the Parent Needs Assessment Inventory were based on factors cited in the professional literature as being related to parent

involvement, and on expert opinions. Professionals who are currently working with parents of handicapped children also were solicited for their views in identifying item content.

Information categories included on the survey consisted of the following:

(a) Family background information, e.g., parent's age, sex, marital status, number and age of children, work status, occupation, education level, availability of transportation.

(b) Parent's attitude toward their child's handicap.

(c) Handicapped child's age and placement.

(d) Parameters of parent activities and programs, e.g., distance, location, meeting times, and purpose.

(e) Parent s perceptions toward the effectiveness of their child's educational program.

(f) Parent's involvement in the special education process (evaluation and IEP meeting phases) prior to their child's enrollment in a special education program.

During the third through sixth months of this project, a comprehensive search was made to identify tools used to assess involvement. Requests for such information appeared in the DEC Communicator (Vol. 10, No. 1, 1983) and in the Ohio Division for Early Childhood (Vol. 1, No. 1, 1983). Copies of both publications may be found in Appendix D.

Other efforts designed to identify family needs included a round-table seminar with professionals serving families of young special needs children. Representatives from Children's Services, mental health, Head Start, health care and various other private and public agencies attended this meeting. See Appendix E for copies of correspondence related to this activity.

A third approach for finding assessment tools was via conference sites. A description of the Project was distributed at the Ohio CEC

Convention, in November, 1983, and at the Research In Action conference in Lubbock, Texas, in February, 1984 (see Appendix F).

A final effort at locating assessment tools occurred by reviewing assessment procedures described in current periodicals or texts. As a result of this search, a Resource File describing such tools was developed (see Appendix G).

After analyzing and synthesizing data accumulated from all these sources, the Parent Needs Assessment Inventory (PNAI) package was developed. It consisted of four instruments. One, the Family Background Data Form, was to be completed by TPS/EC personnel and the IPPP Project staff. However, families were asked to complete the other three tools which included the Feelings About Having a Handicapped Child, Involvement in Community Resources Survey, and the Educational Program Rating Scale. With the exception of the Feelings About Having a Handicapped Child Survey, which was adapted from the P.E.E.R.S. Project, in Philadelphia, all other tools were designed by IPPP Project staff (see Appendix H for permission to use the survey).

After developing the Parent Needs Assessment Inventory, it was submitted for review to the Advisory Board, a professional panel consisting of experts in the field of special education and instrument development, parents who previously had children enrolled in the TPS/EC program, and to the IPPP Project evaluator. Comments or suggestions rendered by them resulted in modifications of the Parent Needs Assessment Inventory. This process was used to ensure face validity of the PNAI. A copy of instruments included in the PNAI may be found in Appendix I.

4. Development of Parent Profiles. Once changes or modifications in the Parent Needs Assessment Inventory were made, the next activity was the development of profiles of parents who are likely to be involved, or not

involved, in specific types of program options; i.e., parent counseling, parent-provided, parent education, and direct participation programs.

The process used to collect this information was as follows. First, all parents eligible to participate in the parent programs were mailed the Parent Needs Assessment Inventory at the end of March. Approximately 65 families responded. A follow-up mailing was made on April 13, 1984 to those parents who did not respond to the first mailing. Next, structured phone interviews were used to contact all those parents who did not respond to the second mailing. A final means of contact was a structured personal interview in the parent's home. Copies of all correspondence sent to families may be found in Appendix J. It should be noted that at least four attempts were made to contact each family.

After the data was collected, appropriate data analysis procedures were implemented. As a result, a descriptive profile of parents at various levels of involvement was developed. A discussion of these profiles is presented in the Findings section of this final report.

5. Development of the IPPP Manual. A manual, Individualizing Parent and Professional Partnerships, was developed to assist professionals in planning and implementing more effective Individualized Parent Participation Programs (IPPP). The content of the manual includes the following:

(a) the importance of parent participation beyond the IEP meeting.

(b) a description of the four types of parent program options; i.e., parent education, direct participation, parent counseling and parent-provided programs, and examples of each.

(c) factors related to various levels of parent involvement in various program options (factors that hinder as well as promote involvement).

(d) the importance of considering the needs and circumstances peculiar to each family in planning parent involvement activities.

(e) guidelines for developing an organized system for planning and implementing IPPP's (this section includes the Parent Needs Assessment Inventory and the Professional Observation/Recording Forms, as well as specific procedures and guidelines designed to facilitate the planning and implementing of IPPP's).

6. Dissemination of IPPP Project findings. A written report of IPPP Project findings and recommendations for future investigative efforts are in the process of being disseminated. Dissemination efforts include contacts with SERRC's, state education departments, university teacher training programs, as well as state and national community agencies working with parents of handicapped children. Dissemination efforts also include the preparation of related articles for publication in professional journals and proposals for presentations at local and national professional conferences. As of August 23, 1984, IPPP Project presentations at the following conferences have been confirmed.

(a) "Strategies for Individualizing Parent Input," to be presented at the International Council for Exceptional Children Conference, April, 1985.

(b) "Research Findings on Family Involvement in the Special Education Environment," to be presented in November, 1984, at the Ohio Council for Exceptional Children.

A proposal for presentation at the conference on "Comprehensive Approaches to Disabled and At-Risk Infants, Toddlers and Their Families" is still pending. The conference is to beld in Washington, D.C., in December, 1984.

Findings

Descriptive PNAI Analysis

There were 208 families whose children were enrolled in the TPS/EC Program. Upon completion of the mailings, structured phone interviews and home visits, 146 or 70.2 of the families returned the PNAI.

The following discussion of PNAI results is divided into four sections: (a) Family Background Data responses, (b) Educational Program Satisfaction responses, (c) Feelings About Having a Handicapped Child Survey responses, and (d) Involvement in Community Resources responses.

Family Background Data. Each family's background information was collected by a TPS/EC professional or IPPP Project staff member. This survey was designed to provide the following information.

1. maternal health, work and personal data.
2. paternal health, work and personal data.
3. family/home composition.
4. child's health, age and other personal data.
5. child's program.
6. family's use of other agencies.
7. transportation services.

The results of this survey suggest that the families involved in the TPS/EC program represent a diverse group of people. Economically, from an income standpoint, about 30% of the families earn less than $10,000/year, with 36% earning between $10,000 - $20,000, and 17% earning $20,000 - $30,000. Over 40% of the families receive public assistance.

The majority of the mothers in this study are between 21 and 30 years of age. Over 70% were identified as being unskilled. Almost the same number, 65%, were unemployed. Most mothers were identified as having good health and tended to be of the white race.

Regarding fathers, approximately 25% of the families in this study do not have the father in the home. However, of those present, over 50% are between 21 and 30 years of age. A comparison of mothers' and fathers' ages suggests similar age patterns. Most fathers are skilled laborers, with the remainder equally divided between professional and unskilled laborers. Almost 80% are employed on a full-time basis. The majority of the fathers are reported to be in good health and are white.

It is interesting to note that about 25% of the families have only one child. The most siblings in any given family was five. However, the age range of those families who have more than one child is considerable, from a one-year old to a forty-year old.

Almost 25% of the families do not have their own car. Although most families seem to be able to find transportation when needed, approximately 10% of these families are without transportation; yet, it is deceptive to make generalizations. As one father commented, "Sure, I got a pick-up truck. It's for work. It gets four miles to a gallon and I can't drive across town to school."

Regarding the youngsters in the TPS/EC program, they have various types of disabilities. Only 20% are below four years of age. Over half are in full-time special center-based programs. About 12% of the children are mainstreamed. Most are bussed to school. The majority of children have been in the program for less than one year.

It is interesting to note that most children live with their natural mother and father. However, 12% live in nontraditional home environments. This figure coincides with the number of families involved with Children's Services Board [illegible] neglect and/or abuse issues.

In conclusion, it can be said that the families who have chilren enrolled in the TPS/EC program are quite diverse. This diversity refers to both the family composition as well as to the extended community activities, such as employment or use of other services. The frequencies and percentages to the Family Background data sheets are presented in Table 1.

Program Rating Scale. The Program Rating Scale consisted of twelve statements about different aspects of special education programming. Each family was asked to check how satisfied they were with their child's program. Using a Likert scale, responses ranged from very satisfied to not satisfied.

Of the 146 respondents, about 80% tend to be consistently satisfied with their child's program. However, it seems that the parent involvement opportunities and the assessment and evaluation phases of the special education process are less satisfying. The frequencies and percentages for the Program Rating Scale are presented in Table 2.

Involvement in Community Resources Survey. One aspect of this project was to determine support services or personnel as perceived by families of young handicapped children. Specifically, IPPP Project staff wanted to know from whom do families seek help when they want to learn more about their child's disability. It seems that families are most likely to ask professionals working in the educational setting, in other agencies or in the medical and health fields for information. Interestingly, friends who have disabled children are not a source for information.

In response to "Who do you turn to for help?", families turn to the three groups mentioned above. In addition, they equally seek out support from other family members.

Table 1

Responses to Family Background Survey

Item	Frequency	Percent	Cum. Percent
Availability of Phone			
unknown	4	2.7	2.7
Yes	125	85.6	88.3
no	17	11.6	100.0
Mother's Age			
unknown	14	9.5	9.5
15-20 yrs.	3	2.0	11.6
21-25 yrs.	35	23.9	35.6
26-30 yrs.	51	34.9	70.5
31-35 yrs.	27	18.5	89.0
36-40 yrs.	10	6.9	95.8
over 40	6	4.1	100.0
Mother's Occupation			
unknown	16	10.9	10.9
professional	11	7.5	18.4
skilled	15	10.3	28.7
unskilled	104	71.2	100.0
Mother's Employment			
unknown	10	6.8	6.8
full-time	29	19.8	26.7
part-time	13	8.9	35.6
unemployed	94	64.3	100.0
Mother's Health			
unknown	20	13.6	13.6
excellent	34	23.2	36.9
good	82	56.1	93.1
fair	8	5.4	98.6
poor	1	.6	99.3
very poor	1	.6	100.0
Mother's Race			
unknown	7	5.0	5.0
Black	23	16.4	21.4
Hispanic	3	2.1	23.5
White	106	75.7	99.2
other	1	.7	100.0
Father's Age			
unknown	36	25.7	25.7
15-20 yrs.	15	10.7	36.4
21-25 yrs.	34	24.2	60.7
25-30 yrs.	35	25.0	85.7
31-35 yrs.	9	6.4	92.1
35-40 yrs.	11	7.8	100.0

Table 1 - continued

Item	Frequency	Percent	Cum. Percent
Father's Occupation			
unknown	46	32.8	32.8
professional	23	16.4	49.2
skilled	48	34.2	83.5
unskilled	23	16.4	100.0
Father's Employment			
unknown	40	28.5	28.5
full-time	78	55.7	84.2
part-time	3	2.1	86.4
unemployed	19	13.5	100.0
Father's Health			
unknown	44	31.4	31.4
excellent	24	17.1	48.5
good	65	46.4	95.0
fair	3	2.1	97.1
poor	3	2.1	99.2
very poor	1	.7	100.0
Father's Race			
unknown	24	17.1	17.1
Black	17	12.1	29.2
White	99	70.7	100.0
Families with one sibling			
Age in years:			
not applicable	38	26.0	26.0
1	13	8.9	34.9
2	9	6.2	41.1
3	4	2.7	43.8
4	13	8.9	52.7
5	11	7.5	60.3
6	5	3.4	63.7
7	10	6.8	70.5
8	9	6.2	76.7
9	7	4.8	81.5
10	8	5.5	87.0
11	6	4.1	91.1
12	5	3.4	94.5
13	2	1.4	95.9
14	1	0.7	96.6
16	1	0.7	97.3
17	1	0.7	97.9
20	2	1.4	99.3
40	1	0.7	100.0

Table 1 (continued)

Item	Frequency	Percent	Cum. Percent
Families with two siblings (con't)			
Sex:			
not applicable	103	70.5	70.5
male	23	15.8	86.3
female	20	13.7	100.0
Handicapped:			
not applicable	130	89.0	89.0
yes	2	1.4	90.4
no	14	9.6	100.0
School age:			
not applicable	100	68.5	68.5
preschool	23	15.8	84.2
elementary	18	12.3	96.5
jr/high school	3	2.0	98.6
post high school	2	1.4	100.0
Families with three siblings			
Age in years:			
not applicable	127	86.9	86.9
1	3	2.0	89.0
2	2	1.4	90.4
3	2	1.4	91.7
4	3	2.0	93.8
5	2	1.4	95.2
7	2	1.4	96.5
9	1	0.7	97.2
10	1	0.7	97.9
12	1	0.7	98.6
14	1	0.7	99.3
15	1	0.7	100.0
Serious medical needs:			
not applicable	131	89.7	89.7
yes	3	2.1	91.7
no	12	8.2	100.0
Sex:			
not applicable	128	87.7	87.7
male	9	6.2	93.8
female	9	6.2	100.0
School age:			
not applicable	129	88.4	88.4
preschool	8	5.5	93.8
elementary	7	4.8	98.6
post high school	2	1.4	100.0

Table 1 (continued) 18

Item	Frequency	Percent	Cum. Percent
Families with one sibling (con't)			
Serious medical needs:			
unknown/not applicable	47	32.2	32.2
yes	8	5.5	37.7
no	91	62.3	100.0
Sex:			
not applicable	40	27.4	27.4
male	61	41.8	69.2
female	45	30.8	100.0
Handicapped:			
not applicable	46	31.5	31.5
yes	20	13.7	45.2
no	80	54.8	100.0
School age:			
not applicable/unknown	49	33.6	33.6
preschool	33	22.6	56.2
elementary	55	37.7	93.8
jr/high school	4	2.7	96.6
post high school	5	3.4	100.0
Families with two siblings			
Age in years:			
not applicable	99	67.8	67.8
1	5	3.4	71.2
2	3	2.1	73.3
3	8	5.5	78.8
4	2	1.4	80.1
5	4	2.7	82.9
6	4	2.7	85.6
7	6	4.1	98.7
8	3	2.1	91.8
9	4	2.7	94.5
10	2	1.4	95.9
11	1	0.7	96.6
1[illegible]	1	0.7	97.3
15	2	1.4	98.6
16	1	0.7	99.3
17	1	0.7	100.0
Serious medical needs:			
not applicable	105	71.9	71.9
yes	5	3.4	75.3
no	36	24.7	100.0

Table 1 (continued)

Item	Frequency	Percent	Cum. Percent
Families with four siblings			
Age in years:			
not applicable	141	96.6	96.6
1	1	0.7	97.3
2	1	0.7	97.9
5	1	0.7	98.6
6	2	1.4	100.0
Serious medical needs:			
not applicable	142	97.3	97.3
yes	2	1.4	98.6
no	2	1.4	100.0
Sex:			
not applicable	142	97.3	97.3
male	3	2.1	99.3
female	1	0.7	100.0
Handicapped:			
not applicable	141	96.6	96.6
yes	1	0.7	97.3
no	4	2.7	100.0
School age:			
not applicable	141	96.6	96.6
preschool	3	2.1	98.6
elementary	2	1.4	100.0
Families with five siblings			
Age in years:			
not applicable	144	98.6	98.6
1	1	0.7	99.3
2	1	0.7	100.0
Serious medical needs:			
not applicable	144	98.6	98.6
yes	1	0.7	99.3
no	1	0.7	100.0
Sex:			
not applicable	144	98.6	98.6
female	2	1.4	100.0
Handicapped:			
not applicable	144	98.6	98.6
yes	1	0.7	99.3
no	1	0.7	100.0

Table 1 (continued)

Item	Frequency	Percent	Cum. Percent
Families with five siblings (con't)			
School age:			
not applicable	144	98.6	98.6
preschool	2	1.4	100.0
Number of children in TPS/EC program			
1	134	91.7	91.7
2	12	8.3	100.0
Parents' Marital Status			
unknown	3	2.0	2.0
married	98	67.1	69.1
single	19	13.0	82.1
separated	7	4.8	86.9
divorced	16	10.9	97.9
widowed	3	2.1	100.0
Socioeconomic Level			
unknown	6	4.1	4.1
$0 - $10,000	48	32.9	37.0
$10 - $15,000	20	13.7	50.7
$15 - $20,000	35	24.0	74.7
$20 - $30,000	26	17.8	92.5
$30,000+	11	7.5	100.0
Public Assistance			
unknown	16	11.0	11.0
yes	42	28.8	39.7
no	88	60.3	100.0
Has own car			
no	33	22.6	22.6
yes	113	77.4	100.0
Relies on Public Transportation			
no	132	90.4	90.4
yes	14	9.6	100.0
Relies on Others for Transportation			
no	130	89.0	89.0
yes	16	11.0	100.0
Has No Transportation			
no	132	90.4	90.4
yes	14	9.6	100.0

Table 1 (continued)

Item	Frequency	Percent	Cum. Percent
Language Spoken at Home			
unknown	1	0.7	0.7
standard English	136	93.2	93.8
Spanish	1	0.7	94.5
nonstandard dialectic English	7	4.8	99.3
other	1	0.7	100.0
Child's Current Age in Years			
2	11	7.5	7.5
3	15	10.3	17.8
4	36	24.7	42.5
5	42	28.8	71.2
6	42	28.8	100.0
Handicapping Condition			
developmentally handicapped	47	32.1	32.1
language impaired	17	11.6	43.8
visually impaired	4	2.7	46.6
multihandicapped	35	24.0	70.5
otitis media	23	15.8	86.3
physically handicapped	11	7.5	93.8
hearing impaired	7	4.8	98.6
other	2	1.4	100.0
Enrolled in Center-Based A.M. Program			
no	77	52.7	52.7
yes	69	47.3	100.0
Enrolled in Center-Based P.M. Program			
no	87	59.6	59.6
yes	59	40.4	100.0
Enrolled in Daily Program			
not applicable	72	49.3	49.3
yes	73	50.0	99.3
no	1	0.7	100.0
Enrolled in Parent Ed. Program			
no	115	78.8	78.8
yes	31	21.2	100.0
Child's Overall Health			
unknown	2	1.4	1.4
excellent	10	6.8	8.2
good	63	43.2	51.4
fair	60	41.1	92.5
poor	8	5.5	97.9
very poor	3	2.1	100.0

Table 1 (continued)

Item	Frequency	Percent	Cum. Percent
Other Disabled Family Members			
yes	21	14.4	14.4
no	99	67.8	84.9
unknown	22	15.1	100.0
Enrolled in Home-Based Program			
no	122	83.6	83.6
yes	24	16.4	100.0
Enrolled in Home- and Center-Based Program			
no	130	89.0	89.0
yes	16	11.0	100.0
Enrolled in Special Center-Based Program			
no	62	42.5	42.5
yes	84	57.5	100.0
Mainstreamed into Head Start			
no	135	92.5	92.5
yes	11	7.5	100.0
Mainstreamed into Private Preschool/Daycare			
no	138	94.5	94.5
yes	8	5.5	100.0
Brings Child to School			
unknown	4	2.7	2.7
mother	29	19.9	22.6
father	1	0.7	23.3
grandparent	1	0.7	24.0
friend	7	4.8	28.8
other (e.g., bus)	99	67.8	96.6
not applicable	5	3.4	100.0
Child Lives with			
mother and father	89	61.0	61.0
mother only	28	19.2	80.1
father only	1	0.7	80.8
mother and stepfather	10	6.8	87.7
foster parents	4	2.7	90.4
adoptive parents	1	0.7	91.1
maternal grandparents	4	2.7	93.8
paternal grandparents	2	1.4	95.2
other	7	4.8	100.0

Table 1 (continued)

Item	Frequency	Percent	Cum. Percent
Time in TPS/EC Program			
unknown	3	2.1	2.1
less than 3 months	14	9.6	11.6
3-6 months	18	12.3	24.0
6-9 months	39	26.7	50.7
second year	54	37.0	87.7
third year	14	9.6	97.3
fourth year	4	2.7	100.0
Child's Legal Guardian			
unknown	5	3.4	3.4
parent	129	88.4	91.8
other	12	8.2	100.0
Children's Service Bureau involved with family			
unknown	9	6.2	6.2
no	120	82.2	88.4
yes	17	11.6	100.0
Parent Drives Child to School			
no	116	79.5	79.5
yes	30	20.5	100.0
Parent/Friends Carpool			
no	143	97.9	97.9
yes	3	2.1	100.0
Child Uses Cab			
no	143	97.9	97.9
yes	3	2.1	100.0
Child Uses Bus			
no	62	42.5	42.5
yes	84	57.5	100.0
Family Uses Other Agencies			
unknown	21	14.4	14.4
yes	80	54.8	69.1
no	45	30.8	100.0

Table 2

Frequency and Percentage of Responses to Items on Program Satisfaction Survey

Item	Very Satisfied		Satisfied		Not Satisfied		Not at all Satisfied		No Response	
	f	%	f	%	f	%	f	%	f	%
The overall program in general	70	47.9	58	39.7	12	8.2	4	2.7	2	1.3
The teaching methods used	73	50	54	36.9	14	9.5	--	--	5	3.4
The effectivness of the staff	74	50.6	52	35.6	15	10.2	--	--	5	3.4
The frequency of contact with teachers	66	45.2	60	41.0	13	8.9	4	2.7	3	2.0
Learning materials used	65	44.5	62	42.4	14	9.5	1	.6	4	2.7
Parent involvement activities available to you	53	36.3	61	41.7	20	13.6	7	4.7	5	3.4
The staff's willingness to include you in learning activities	80	54.7	50	34.2	8	5.4	4	2.7	4	2.7
Assessment procedures used	59	40.4	60	41.0	16	10.9	3	2.0	8	5.4
Methods of monitoring your child's progress	65	44.5	53	36.3	18	12.3	5	3.4	5	3.4
Accomplishments of the program	64	43.8	55	37.6	15	10.2	5	3.4	7	4.7
Your level of involvement in the program	42	28.7	73	50.0	20	13.6	8	5.4	3	2.0
Opportunities for your suggestions	55	37.6	65	44.5	15	10.2	7	4.7	4	2.7
The IEP meeting	41	28.0	53	36.3	13	8.9	4	2.7	35	23.9

N = 146

Regarding social events, over half of the families are involved with their families' social activities. A surprising finding was that the only other dominant social group with whom families were involved were "friends who do not have a handicapped child". About 32% viewed themselves as meeting with these friends frequently; yet only about 8% of the families sought out other families with disabled youngsters for social purposes.

It is important to point out that few families were involved with religious leaders or university professors for support. Table 3 has an overview of frequencies and percentages to items on the Involvement in Community Resources Survey.

Feelings About Having a Handicapped Child Survey. The majority of the items on this survey are from the PEERS Project's Parent Attitude Scale. This scale asks parents to respond to statements about their role as a parent, their feelings about their child, their spouse's feelings and their other child(ren)'s feelings. The IPPP Project added similar items focusing on the extended family, spouse's family and friends' feelings about their handicapped child.

An analysis of these responses suggest that most families consistently feel accepting about their handicapped child and about their role as a parent. (It should be noted that almost all surveys were completed by mothers.) Similarly, it seems that the respondents view their spouses and other children as having a positive relationship with their disabled child. Responses to the Feelings About Having a Handicapped Child Survey are presented in Table 4.

Table 3

Frequency and Percentage Responses to Involvement in Community Resources Survey

Item	Very Often*		Often		Occasional		Rarely		No Response	
	f	%	f	%	f	%	f	%	f	%
When you want more information about your child's handicap, where do you go?										
Friends w/handicapped children	3	2.0	4	2.7	28	19.1	105	71.9	6	4.1
Other family members	10	6.8	20	13.6	32	21.9	78	53.4	6	4.1
Friends wo/handicapped children	2	1.3	8	5.4	34	23.2	99	6[illegible].8	3	2.0
Minister, priest or rabbi	1	.6	2	1.3	5	3.4	133	91.0	5	3.4
Agencies serving handicapped children	13	8.9	28	19.1	46	31.5	58	39.7	1	.6
People at Toledo Public Schs.	16	10.9	26	17.8	53	3[illegible].3	47	32.1	4	2.7
People at Head Start	4	2.7	8	5.4	19	13.0	108	73.9	7	4.7
Medical or health care people	20	13.6	29	19.8	62	42.4	32	21.9	3	2.0
University professors	3	2.0	0	0.0	4	2.7	134	91.7	5	3.4
Who do you turn to for help?										
Friends w/handicapped children	2	1.3	6	4.1	21	14.3	111	76.0	6	4.1
Other family members	19	13.0	27	18.4	50	34.2	47	32.1	3	2.0
Friends wo/handicapped children	6	4.1	7	4.7	33	22.6	96	65.7	4	2.7
Minister, priest or rabbi	3	2.0	2	1.3	6	4.1	132	90.4	3	2.0
Agencies serving handicapped children	11	7.5	20	13.6	49	33.5	64	43.8	2	1.3
People at Toledo Public Schs.	13	8.9	21	14.3	56	38.3	52	35.6	4	2.7
People at Head Start	3	2.0	6	4.1	19	13.0	111	76.0	7	4.7
Medical or health care people	14	9.5	26	17.8	63	43.1	39	26.7	4	2.7
University professors	2	1.3	1	.6	4	2.7	133	91.0	6	4.1

Table 3 (continued)

Item	Very Often		Often		Occasional		Rarely		No response	
	f	%	f	%	f	%	f	%	f	%
Where do you and your family go for social gatherings?										
Friends w/handicapped children	6	4.1	6	4.1	14	9.5	115	78.7	5	3.4
Other family members	30	20.5	53	36.3	44	30.1	17	11.6	2	1.3
Friends wo/handicapped children	20	13.6	27	18.4	46	31.5	49	33.5	4	2.7
Minister, priest or rabbi	4	2.7	11	7.5	6	4.1	121	82.8	4	2.7
Agencies serving handicapped children	2	1.3	6	4.1	19	13.0	113	77.3	6	4.1
People at Toledo Public Schs.	5	3.4	5	3.4	31	21.2	101	69.1	4	2.7
People at Head Start	2	1.3	3	2.0	6	4.1	128	87.6	7	4.7
Medical or health care people	6	4.1	5	3.4	14	9.5	118	80.8	3	2.0
University professors	1	.6	1	.6	1	.6	137	93.8	6	4.1

*Very often - 1 to 2 hours daily

Often - several hours weekly

Occasional - several hours every month

Rarely - not at all or less than once or twice a year

**N = 146

Table 4

Frequency and Percentage of Responses to Feelings About Having a Handicapped Child Survey

Item - I feel	Strongly Agree		Agree		Disagree		Strongly Disagree		No Response	
	f	%	f	%	f	%	f	%	f	%
Sorry for my special child	14	9.5	38	26.0	49	33.5	39	26.7	6	4.1
Happy thinking about special child	54	36.9	69	47.2	17	11.6	4	2.7	2	1.3
Proud thinking about special child	68	46.5	61	41.7	12	8.2	3	2.0	2	1.3
Not self-conscious	62	42.4	50	34.2	24	16.4	6	4.1	4	2.7
Able to admit child has a problem	80	54.7	54	36.9	5	3.4	5	3.4	2	1.3
Governed more by emotion than reason	15	10.2	49	33.5	58	39.7	16	10.9	8	5.4
Feel good about myself	21	14.3	62	42.4	50	34.2	10	6.8	3	2.0
Feel sorry for myself	3	2.0	11	7.5	69	47.2	60	41.0	3	2.0
Not angry this happened to me	47	32.1	61	41.7	21	14.3	13	8.9	4	2.7
Responsible for child having problem	7	4.7	30	20.5	60	41.0	43	29.4	6	4.1
Confident in my role as parent	52	35.6	78	53.4	8	5.4	3	2.0	5	3.4
Discouraged in my role as parent	6	4.1	16	10.9	66	45.2	53	36.3	5	3.4
Satisfied in my role as parent	40	27.3	84	57.5	16	10.9	2	1.3	4	2.7
Confused in my role as parent	9	6.1	33	22.6	71	48.6	28	19.1	5	3.4
Alone in my role as parent	11	7.5	33	22.6	63	43.1	36	24.6	3	2.0
Able to help special child	57	39.0	77	52.7	7	4.7	2	1.3	3	2.0
Pressured by many demands	19	13.0	50	34.2	56	38.3	18	12.3	3	2.0
Competent in my role as parent	31	21.2	90	61.6	16	10.9	2	1.3	7	4.7
Able to carry on normal life	60	41.0	72	49.3	10	6.8	1	.6	3	2.0
Hopeful about child's future	76	52.0	60	41.0	4	2.7	2	1.3	4	2.7
Concerned about child's future	28	19.1	64	43.8	30	20.5	20	13.6	4	2.7

Table 4 (continued)

Item - I feel	Strongly Agree		Agree		Disagree		Strongly Disagree		No Response	
	f	%	f	%	f	%	f	%	f	%
Child will be independent adult	65	44.5	61	41.7	10	6.8	3	2.0	7	4.7
I am easier to get along with	15	10.2	49	33.5	67	45.8	10	6.8	5	3.4
No change in plans for more children	38	26.0	65	44.5	21	14.3	16	10.9	6	4.1
Not concerned about effect of child on marriage	28	19.1	49	33.5	22	15.0	8	5.4	39	26.7*
Worried about spouse's coping ability	2	1.3	21	14.3	55	37.6	29	19.8	39	26.7*
Spouse is harder to get along with	0	0	14	9.5	54	36.9	39	26.7	39	26.7*
Spouse has changed plans to have more children	5	3.4	10	6.8	57	39.0	34	23.2	40	27.3*
Spouse feels different about self	3	2.0	20	13.6	56	38.3	28	19.1	39	26.7*
Spouse feels sorry for child	7	4.7	24	16.4	45	30.8	31	21.2	39	26.7*
Spouse uncomfortable with child	1	.6	8	5.4	52	35.6	49	33.5	36	24.6*
Spouse can admit child has problem	24	16.4	69	47.2	8	5.4	7	4.7	38	26.0*
Spouse willing participant in program	17	11.6	66	45.2	20	13.6	5	3.4	38	26.0*
Spouse willing participant in other contacts; i.e., therapy	17	11.6	67	45.8	24	16.4	2	1.3	36	24.6*
Spouse feels sorry for self	0	0	5.34		61	41.7	44	30.1	36	24.6*
Spouse angry this happened to him/her	3	2.0	15	10.2	53	36.3	37	26.7	36	24.6*
Spouse unable to carry on normal life	1	.6	2	1.3	57	39.0	50	34.2	36	24.6*
Spouse's family understands child	23	15.7	58	39.7	18	12.3	9	6.1	38	26.0*
Spouse's family dislikes being with child	2	1.3	3	2.0	49	33.5	54	36.9	38	26.0*
Spouse is unkind to child	1	.6	5	3.4	34	23.2	70	47.9	36	24.6*

Table 4 (continued

Item - I feel	Strongly Agree		Agree		Disagree		Strongly Disagree		No Response	
	f	%	f	%	f	%	f	%	f	%
Spouse is comfortable with child	52	35.6	43	29.4	8	5.4	7	4.7	36	24.6*
Spouse does not want to be around child	1	.6	0	0	38	26.0	70	47.9	37	25.3*
Spouse's family kind to child	47	32.1	53	36.3	5	3.4	3	2.0	38	26.0*
Spouse understands child	41	28.0	55	37.6	10	6.8	4	2.7	36	24.6*
Spouse's family comfortable w/child	38	26.0	56	38.3	11	7.5	1	.6	40	27.3*
Friends comfortable with child	49	33.5	72	49.3	16	10.9	3	2.0	6	4.1
My family is unkind to child	1	.6	4	2.7	45	30.8	91	62.3	5	3.4
Friends do not understand child	8	5.4	30	20.5	65	44.5	40	27.3	3	2.0
My family understands child	44	30.1	80	54.7	15	10.2	3	2.0	4	2.7
Friends do not want to be around child	1	.6	11	7.5	63	43.1	68	46.5	3	2.0
Family does not want to be around child	1	.6	3	2.0	53	36.3	84	57.5	5	3.4
Friends are kind to child	51	34.9	84	57.5	5	3.4	3	2.0	3	2.0
Family uncomfortable around child	6	4.1	11	7.5	53	36.3	71	48.6	5	3.4
I lack time with other children	13	8.9	23	15.7	48	32.8	34	23.2	28	19.1
Concerned w/effect of this child on my other children	6	4.1	22	15.0	53	36.3	36	24.6	29	19.8
Siblings unaffected by this child	24	16.4	48	32.8	34	23.2	8	5.4	32	21.9
Siblings comfortable w/this child	51	34.9	54	36.9	8	5.4	1	.6	32	21.9
Sublings happy due to this child	31	21.2	57	39.0	21	14.3	4	2.7	33	22.6
Siblings totally accepting of child	48	32.8	62	42.4	5	3.4	0	0	31	21.2

*Answered only by respondents with spouses

Profile Data

In order to compare "low involvement" families with "high involvement" families, it was first necessary to identify which families would indeed be either low or high in terms of involvement. At the recommendation of the project evaluator, it was decided that frequency of involvement would be the criteria for determining which families would be rated as high versus low involvement. It should be noted that no significant correlations were found between the families' frequency of activities and their level of involvement in these activities.

Families were grouped according to the number of occasions that they had contact with the program, as determined by the TPS/EC staff. Quartiles were determined in order to form extreme groups that could be compared. The lowest quartile included those families who had three or fewer contacts with the program during the data gathering period, approximately seven months. Throughout the data collection phase, the TPS/EC professionals documented 2,398 episodes of involvement. Those in the upper quartile had thirteen or more contacts during that period. It should be noted that low versus high involvement was not related to type of program option, e.g., parent education rather than direct participation.

These groups were then compared on the items of the three scales completed by the families and on the items listed on the Family Background form. The purpose of this comparison was to isolate factors that might account for the differences in contacts. Chi square tests of independence were run on nominal variables and the t-test for means of independent samples was used for data that had equal interval scaling.

Statistical significance was set at the .05 level; i.e., significant differences had less than a 5% probability of being due to chance alone. Two-tailed tests were done in this exploratory analysis.

An analysis of the data indicate that several variables significantly discriminated between the upper and lower quartiles (see Table 5 which presents those characteristics of more involved families).

Variables that significantly discriminated between the upper and lower quartiles were few, most of them related to the organization of the educational program itself. A major variable was whether the program was center- or home-based. Families with children enrolled in a center-based program were more likely to be involved than families served by a home-based specialist. This finding is most surprising since home-based programs, by nature, are designed to provide direct service to parents. Specifically, center-based programs which are daily and special education oriented and which provide transportation are more likely to promote involvement. It also seems that those families which are not involved with other agencies are more likely to be involved in their child's special education program.

As indicated in Table 5, families of hearing impaired children are more involved than families who have children with other types of disabilities. One explanation may be that the TPS/EC program offers specific family activities, such as signing classes, for HI families.

The fact that families with children in mainstreamed settings are not involved suggests that they align themselves with the mainstreamed setting. This perspective would suggest that such families view the mainstreamed setting as an appropriate learning environment since they tend not to solicit opinions or advice from the special education resource personnel associated with these programs.

A major noneducational variable related to involvement was transportation. It is unrealistic for professionals to offer parent activities without considering transportation needs. Families without consistent transportation

Table 5

A Comparison of Percentage Scores Found to Discriminate Involvement

Item	Quartile	
	Lower	Upper
Parent has own car*	.70	.86
Handicapped child's age*		
0 to one year	.02	.00
one to two years	.08	.02
two to three years	.20	.03
three to four years	.20	.22
four to five years	.20	.47
five to six years	.30	.26
Type of disability*		
developmentally handicapped	.18	.21
language impaired	.12	.05
visually impaired	.04	.02
multihandicapped	.30	.28
otitis media	.30	.22
physically handicapped	.06	.03
hearing impaired	.00	.19
Enrolled in daily program**	.34	.84
Enrolled in parent education program**	.34	.03
Enrolled in other program options**	.38	.12
Enrolled in home-based program**	.30	.02
Enrolled in center-based program**	.32	.88

Table 5 (continued)

Item	Quartile	
	Lower	Upper
Mainstreamed in regular preschool**	.14	.00
Length of time in program**		
less than three months	.04	.00
three to six months	.18	.09
six to nine months	.31	.48
second year	.04	.25
third year	.04	.25
fourth year	.02	.04
How child gets to program**		
parent	.32	.07
cab	.00	.03
carpool	.06	.00
bus	.38	.88
other	.04	.02
Type of service received from other agencies*		
counseling	.04	.12
educational	.04	.14
financial	.24	.07
legal	.02	.00
social	.00	.03

* $p < .05$

** $p < .01$

of their own probably will not attend such activities, regardless of their value.

Interesting contradictions to the folklore about parent involvement were also found. Family background variables, such as parents' age, race, employment and income level are not predictors of involvement. In addition, how parents feel about their handicapped child does not seem to be related to their involvement.

An analysis of these characteristics suggests that family involvement is related more to program design than to noneducational family background variables. These findings indicate that professionals might be able to improve parent involvement if program modifications were made. Specifically, it is advisable that professionals do the following:

1. Provide activities that are specific to exceptionalities; rather than offering general topics to the parent population at large.

2. Plan realistic information sharing opportunities for families who are actively involved with other agencies and with health care services.

3. Offer alternative involvement opportunities for families who either do not have their own transportation or who are unable to use their transportation, often because of economic reasons, for school-related activities.

Recommendations for Further Study

The information from the present study was obtained from a single early childhood program. Although the program has several components and served a diverse population, there are likely to be some conclusions that are specific to the program that was studied. Therefore, it would be prudent for potential adopters of these recommendations to repeat the study in their own setting. Such a cross validation of the results may not have to be as large a study, but if the program offerings have a different configuration than the Toledo Public Schools' program, the correlates of involvement could possibly differ.

A second suggestion would be to include some variables that were not used in this study. Testing parents on their knowledge of their child's handicapping condition and observing parent-child interactions in the home are but two of the variables that may provide additional insights into the relationships between parent involvement and parent characteristics.

A third recommendation is to use the Parent Needs Assessment Inventory with a group of families in order to see whether the educational programming that such use promotes is substantially different from what is already provided. A needs assessment of the parent, as opposed to the child, may lead to the development of new materials, new roles for professionals, and new expectations on the part of both professionals and parents. Some restructuring and redefining of responsibilities may be needed. On the other hand, it is also quite possible that the parent needs assessment would sharpen the professional's awareness of the family of the handicapped child, but not require sizeable change on his/her part. The only way to really know is to use the PNAI and to seriously consider the information that it provides.

The most important recommendation for further study is to go beyond correlational analysis to see whether changes in programming result in corresponding changes in parent involvement. For example, since transportation was found to be a barrier to involvement, would providing transportation, establishing meeting places near bus routes, arranging car pools, and the like result in greater involvement? Only a pilot study would really provide trustworthy answers to that question.

A second example comes from the finding that those who are involved with obtaining medical services for their child were not likely to be involved with the educational program. There could be a way to meld the two programs, medical and educational, through linkages with physicians, to see whether such linkages would enhance the involvement of these parents in educational programs.

The results of the present study indicate which factors are related to non-involvement. Some of these factors could possibly be manipulated to change that realtionship. Only a well controlled study of such interventions will confirm these expectations. Perhaps providing transportation or promoting medical-educational linkages will not enhance involvement, but we will not know this until it is attempted.

Studies Implied from the Present Research

Other studies are also implied from the results of this study. Although these studies have no direct bearing on the focus of the parent involvement analysis, subsequent investigation using much of the data that was gathered in this study could address the following questions:

1. Why is there such a uniformly high level of satisfaction with the early childhood educational program? Is this satisfaction based on child progress? Is it based on having some services as opposed to having no

services? Is it based on the psychological relief and physical respite of freeing up parent time?

2. Are the feelings about being the parent of a handicapped child related to stages of development? Parents of handicapped children are thought to progress through several stages, from denial to acceptance. Is this staging related to their feelings about their child, themselves or their families?

3. What are the social costs of non-involvement? An assumption of this study was that it was quite appropriate for some families not to be involved in the educational programs of their handicapped child. It may be important to determine the feelings and beliefs of those parents who chose not to be involved. Is the parenting role defined differently by those parents? Are they intimidated by the educational system, or do they have disdain for it? Do they experience guilt feelings about their non-involvement? Perhaps such an analysis would help us to understand when non-involvement is appropriate.

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Appendix A

Advisory Board Members

As indicated in the following listing, IPPP Board Members included professionals representing an array of agencies serving families with handicapped children as well as parents of special needs children.

TOLEDO PUBLIC SCHOOLS
MANHATTAN AND ELM
TOLEDO, OHIO 43608

Jalna S. MacLaren
Director

HOME ECONOMICS DEPARTMENT
AND
FAMILY LIFE EDUCATION CENTER

PARENT INVOLVEMENT IN EDUCATION
ADVISORY BOARD AND STAFF
1983-1984

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Jaina S. MacLaren
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HOME ECONOMICS DEPARTMENT
AND
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PARENT INVOLVEMENT IN EDUCATION
CONTINUED
Page 2

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Appendix B

Advisory Board Meeting Minutes

I. ADVISORY BOARD ACTIVITIES

Five advisory board meetings were held on:

October 26, 1983

December 7, 1983

February 22, 1984

April 4, 1984

June 14, 1984

Following are the minutes of the IPPP advisory board meetings.

Minutes
IPPP Advisory Board Meeting
10-26-83

The first meeting of the IPPP Advisory Board Committee opened with a welcome and introductions. Dr. Colleen Mandell then provided an overview of the IPPP project with a discussion of the goals, proposed activities, and projected timeline. Following this overview, discussion focused on the role of the Advisory Board members in the implementation of the project. Dr. Mandell stressed the importance of Advisory Board input, especially im terms of making the project relevant to different types of community service agencies working with children and their families. Input from Advisory Board members suggested that meaningful parent involvement with interagency communication and collaboration is a high-priority concern of service providers.

Participants were then reminded about the next Advisory Board meeting scheduled for Dec. 7th to be held at the Toledo Board of Education Administration Building. An abstract of the IPPP project is to be mailed to all participants along with the agenda for the next meeting.

The second Advisory Board meeting for the IPPP project opened with a brief review of the proceeding meeting. Ruth Johnson, IPPP site coordinator, then gave a report on the data collection process. She reported that Phase I of data collecting would be finished Dec. 9th and that Phase II would start in mid-January. She commended the staff of Toledo Public Schools Early Childhood Program for their cooperation in the data collection process.

Dr. Mandell briefly reviewed the nature and scope of the IPPP project by defining its two-pronged focus: (a) to collect and analyze data relating to parent involvement activities in the early childhood program, and (b) to develope a system for individualizing parent participation programs. Dr. Mandall noted that field testing, or validating, the IPPP system and products is not within the scope of the project funded for the 1983-84 year. She then introduced ideas on a follow-up proposal that would involve other agencies in the validation of the IPPP system.

Suggestions and comments from the Advisory Board members included the following:

(1) the need to provide preliminary feedback to the early childhood staff

(2) the need for the IPPP process and tools to be applicable to professionals in other community agencies serving families of handicapped and at-risk children

(3) the need to include reference to parent involvement in perinatal and other support programs when collecting background information on families

Advisory Board Minutes
Parent Involvement in Education
February 22, 1984

The February 22 Advisory Board Meeting opened with Dr. Colleen Mandell sharing the following data collection instruments to be used in the IPPP project:

1. Parent Letter
2. Attitude toward family
3. Involvement in community resource
4. Feelings regarding disabled child
5. Program satisfaction

Each committee member was asked to critique each one. Discussion followed. Several suggestions were made as to the individual items on the instruments.

Colleen thanked the committee and asked them to return any of the instruments to her with suggestions regarding wording, format, etc., within the next week.

In addition, Dr. Mandell gave each member a flyer advertising the BGSU College of Education Seventh Annual Early Childhood Spring Conference planned for March 31, 1984.

Carol Quick announced that the FOSPA Project was going very well. She gave each member a copy of the Pupil Registration Form used to gather statistics from participants. Enrollment statistics were shared as follows:

Classes Began: January 10 - Heatherdowns
January 18 and 19 - Cherry

Enrollment:

Heatherdowns:

	Families	People
Tuesday Morning 9:30 - 11:00	10	20
Tuesday Evening 6:30 - 8:00	17	34

Cherry Preschool:

Wednesday Afternoon 1:00 - 2:30 (Head Start)	17	34
Thursday Morning 9:30 - 11:00	9	18
Afternoon 12:30 - 2:00	5	10
TOTAL	58	116
Trained Volunteers		8
		124

Penny Mueller, Joyce Carnovale, and Janet Freeman shared progress and format of the program by way of a slide presentation. They indicated that there was a good mix of both mothers and fathers participating. Carol Quick indicated that Head Start provided equipment and materials to the project. Janet Freeman was instrumental in both securing and adapting the materials for Head Start participants. She is also conducting the one class at Cherry for Head Start Parents.

Carol indicated that a most difficult task was that of processing and packaging 120 Learning Center boxes for each site and adapting them to meet the needs of diverse cultural families and the special needs children.

Advisory Board Minutes (cont.)

Sue Young, Toledo Public Schools Evaluator, has volunteered to assist in developing a process and impact evaluation for the project. Since the FOSPA model needs to meet the needs of Toledo families, she will work closely with the staff to design an instrument to assess all aspects including volunteer use and training.

Discussion followed regarding plans for next year with input from the committee. Carol will continue this discussion at the April 4th meeting.

ep

The April 4, Advisory Board meeting opened with up dates on the IPPP and FOSPA projects. Carol Quick reported that parents in the FOSPA program are assisting in the packaging of the learning center boxes and that this was going well. Carol also reported that a FOSPA status report and a proposal for additional funding for the 1984-85 school year have been submitted to General Mills. The new proposal was written to reflect the following:

A. A projected enrollment of 150 - 175 families

B. Adaptations to meet the special needs of handicapped children

C. Adaptations to reflect the cultural diversity of the community

D. The utilization of trained volunteers to assist in implementing the project

Families enrolling in the FOSPA program for the 1984-85 school year will be asked to pay a $10 fee for consumable supplies. Special efforts will be made to enroll more special needs children in the FOSPA classes.

A suggestion was made to build some money into the budget for special recognition of the FOSPA volunteers. This idea was endorsed by other members of the Advisory Board.

Ruth Johnson provided an update on IPPP project activities, beginning with a discussion on the revised Parent Needs Assessment Inventory (PNAI). Ruth reported that revisions were based on Advisory Board input and field testing results.

The first mailing of the PNAI sent out on March 22, to 241 families in the Early Childhood Program. Within a two week period, 26 percent of the surveys were returned. A second mailing is scheduled to go out on April 9, 1984.

Ruth reported that the parent-involvement data collected throughout the year is in the process of being coded and analyzed at BGSU, but that no report is ready at this point. She indicated that this was disappointing in that the IPPP staff had hoped to provide some preliminary findings and feedback to the Early Childhood staff by now. She said that such a report would be made available as soon as possible.

Ruth also reported that the IPPP staff is now working on the outline for the Parent Involvement Manual and that suggestions from the Advisory Board would be welcomed. She also noted that several proposals have been submitted for presentations at state and national conferences.

Discussion then focused on connecting links between the FOSPA and IPPP Projects. It was noted that both projects are based on the fact that parent involvement can enhance the effectiveness of a child's educational program and that parents can develop the skills, knowledge, and attitudes necessary for becoming confident and competent in their role as their child's primary teacher.

Inter-program and inter-agency collaboration were also noted as characteristics common to both the IPPP and FOSPA Projects. Also noted was the potential for the results of these two projects to offer valuable insights and information as to future program planning.

Several Advisory Board members then reported on different parent involvement activities available through their respective programs or agencies. A question was raised as to the status of the EPSDT Program in Lucas County. As no one was sure, the suggestion was made to invite someone from the Health Department to explain the EPSDT Program at the next Advisory Board meeting.

Mr. Guilford reported that Chapter I involves parents in the program in a number of ways. Many parents serve as volunteers; others serve on advisory councils; and some become more actively involved in their school's P.T.A. Mr. Guilford commented on the fact that involvement activities must be meaningful to the parents, ie. must meet their needs and interests.

A major concern identified by the advisory group related to the involvement of parents of kindergarten students in the Toledo Public Schools. The number of students each teacher is assigned and the lack of a system for parent involvement were some of the concerns expressed.

Another concern related to the provision of appropriate services for children with identified or suspected special needs. While the FOSPA Program is helpful in identifying and serving young children with special needs, a system for "transitioning" these children into kindergarten still needs to be refined.

Update:

- FOSPA staff will visit the Buffalo FOSPA Program on May 1, 1984, to share ideas, express mutual concerns, and solve problems.

- Carol Lewis, consultant from St. Cloud, will visit the Toledo FOSPA program on May 22 and 23. The focus of her consultation will be:

    1. Adapting learning centers and activity kits for four year old children with developmental delays. Carol will share ideas and materials from the P.A.T. Project.

    2. Assisting in identifying strategies and materials to be used in parent discussion activities.

    3. General problem solving.

ep

cc: Dr. Working
Carol Lewis
Carol Quick
Colleen Mandell
Jalna MacLaren

The final Parent Involvement in Education Advisory Board meeting was held June 13, 1984. The meeting opened with an update on IPPP activities, including a preliminary synopsis of the results of the parent survey and parent involvement data collected by the Early Childhood staff. While the data analysis process is not complete at this time, emerging trends suggest that the majority of parent involvement activities fall in the category of parent education and that parents are generally satisfied with the services offered through the Early Childhood program.

Dr. Mandell reported a 65 percent return on the surveys mailed to the parents in the Early Childhood Program. She also reported that the majority of the parents signed their names to their completed surveys and that the procedures used for collecting data followed the process outlined in the grant proposal. These procedures included second mailings, follow-up phone calls, and person interviews.

Ruth Johnson then presented an outline draft of the Parent Involvement Manual to be completed during the summer. She requested advisory members to review this outline and to provide their suggestions as to any proposed improvements.

Dr. Mandell reminded advisory members that they would be receiving a copy of the Parent Involvement Manual along with the final report of the IPPP Project.

Penny Mueller then shared information about the FOSPA staff's visitation to the Buffalo Early Childhood Program. She explained that Buffalo is now in its second year as a FOSPA adoption site and that it was very interesting to compare problems, concerns, and solutions with another newly organized FOSPA site. One outcome of this visitation was some pre-planning discussion about arranging a mini-conference of FOSPA programs, including the St. Cloud, Buffalo, and Toledo sites.

The FOSPA staff also reported on the observation visit made by Carol Lewis, St. Cloud FOSPA Resource Coordinator. The staff felt that Ms. Lewis was very impressed with the quality of the Toledo program and that she gained valuable insights into the adaptations being made to accommodate special needs children and to reflect the multi-cultural diversity of the Toledo population. Ms. Lewis was also impressed with the benefits gained through inter-agency and inter-departmental collaboration and with the training and involvement of volunteers.

Janet Freeman then shared information about the Head Start component of the FOSPA Program. She reported active parent involvement (including on-going participation of several fathers) and generous support, in the way of equipment and supplies from the Toledo Head Start Program.

Carol Quick made a brief report on the number and types of families serve through FOSPA during the 1983-84 year and acknowledged the support received from building administrators and volunteers serving in the FOSPA Program.

Advisory Board members were asked to complete a survey concerning their involvement and their ideas for future directions. The meeting was then adjourned with each of the Advisory Board members receiving a certificate of appreciation for their support and participation in the FOSPA Program.

Appendix C

Documentation of Collaboration with TPS/EC Staff

DOCUMENTATION OF PARENT PARTICIPATION

TPS/EC Professionals were an integral part of this research project. They were asked to collect data on families' level of involvement in various activities.

The purpose of the first meeting with TPS/EC staff was to explain the IPPP Project, their role in the IPPP Project, and to get an overview of specific activities they offer to families. See the following memo to staff on this meeting.

August 29, 1983

We're looking forward to your input on implementing the IPPP (Individualizing Parent Participation Programs) project. We've scheduled the following times on Wed., Sept. 7th, to do some brain-storming with you as to parent involvement options provided through the early childhood program. We'll be looking at both formal and informal parent involvement.

9-9:45 Meeting with all classroom teachers

10-10:45 Meeting with diagnositc & support personnel

11-11:45 Meeting with parent ed and resource staff

Hope your're available to meet with us at McKesson according to this schedule. If you have a time conflict, please come at one of the other scheduled times. We value the input of everyone in the program and are looking forward to working with you this year.

Thanks!

Colleen & Ruth

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At the second meeting with the TPS/EC staff, the focus was on how each staff member provides involvement opportunities to families. The staff was asked to complete the following open-ended questions.

INDIVIDUALIZING PARENT PARTICIPATION PROGRAMS

Project Director:

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Department of Special Education
Bowling Green State University
Bowling Green, Ohio 43403
(419) 372-0151

Site Coordinator:

Ruth Johnson
McKesson School
1624 Tracy
Toledo, Ohio 43605
(419) 666-5180

Grant # G008300318

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The IPPP Project: Individualizing Parent Participation Programs

Handicapped children need an individualized educational plan to meet their special instructional needs. Parents of handicapped children have special needs, too. By looking at the individual parent needs and also each family, we, as professionals, are better able to implement effective parent programs.

Within the last several years, special educators have been given additional responsibilities, many of which involve noninstructional tasks. We are mandated to involve parents in their handicapped child's program. Yet, too often attempts at involving parents are rejected or program goals go unmet. The whole area of parent involvement has become, understandably, a sensitive issue for some professionals, while others have chosen to ignore it.

The purpose of the IPPP project is to investigate why some parents get involved in their child's program while others choose not to be involved. Specifically, the project has two goals. First, identify factors related to parent participation in various types of programs. Here we are looking at both formal and informal involvement. The focus is on the parents and family needs.

In order to complete this aspect of the project, we will need your help in determining which parents are involved in related activities. We know you are truly busy already and we will do everything possible to minimize your involvement in this noninstructional task.

The second goal of the project is to develop the Parents Needs Assessment Inventory (PNAI). Information derived from the PNAI will help

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professionals determine realistic program options for parents. The PNAI will be part of a manual for professional use in developing effective parent involvement programs. Activities related to this goal will be the responsibility of the IPPP project staff.

The IPPP Project is a joint venture between the Department of Special Education at Bowling Green State University and the Toledo Public Schools Early Childhood Program.

We're looking forward to working with you.

Colleen and Ruth

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Name_____

Parent involvement activities come in many different packages. These may include attending a parent education classes, participating in parent-child sessions, observing or volunteering in the classroom, and exchanging frequent notes with their child's teacher. Please indicate those activities, both formal and informal, which you use to involve parents.

THANK YOU! THANK YOU! THANK YOU!

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5

Name _____

The extent to which parents are involved in their child's educational program is difficult to assess. Perhaps you have found some ways of recording parent involvement that might help us. Please describe your suggestions for documenting parent involvement for each parent activity.

THANK YOU! THANK YOU! THANK YOU!

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At the third meeting, TPS/EC staff and IPPP staff defined "level of involvement" (see attached definitions), and reviewed the various forms to be used to collect "level of involvement" information.

Based upon TPS/EC staff feedback, the following data collection forms were developed and later utilized by project staff.

1. a Formal Activities Log
2. an Apartment/Home Visit Log
3. a Therapy/Diagnostic Informal/Interaction Log
4. a Phone Log

Examples of these recording forms are included here.

Criteria for Involvement

To help clarify the levels of involvement, the following may be helpful.

Not involved

Refers to parent not attending an activity, not making phone calls, and so forth. The focus here is on the parent choosing to be involved or not. The following are some examples.

1. Does not initiate phone call
2. Does not return teacher initiated phone call
3. Does not attend IEP meeting, open house, etc.
4. Says he will do anything to help, but does not

Somewhat involved

Generally refers to attendance but not participation. It also includes those parents who attend but do not follow through with professional's suggestions or those who fail to focus on their child. For example:

1. Attends conference but does not ask questions specifically related to her child
2. Asks for advice on child-related issue but does not follow through with recommendation. Often a time lapse will occur before professional can determine whether recommendation was followed
3. At home or therapy, parent attends but does not model approximate predetermined behavior
4. Attends conference, workshop, but leaves early

Involved

Refers to those behaviors which exemplify a response, question, concern to the child or program. The focus here is on the child. For example:

1. Calls school to discuss child's progress, language problems, medical needs, etc.
2. Attends workshop and asks questions related to topic or applies topic information to her child

Actively involved

Refers to active participation. At this level, no only does parent ask questions, but she or he follows through with the recommendations, suggestions, etc. OR the parent asserts self for professional to provide information. We do not want to interpret these behaviors (i.e., style of communication) as either positive or negative. For example:

1. Attends workshop and completes related homework or attends workshop and asks questions about child and continues until information is sufficient
2. Phones school and asks parent to follow through with request to send in classroom material

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CONTACT RECORD

Date	Type of Contact/ Purpose	Amount of Time	Level of Involvement				Name/Relationship to child
			NI	SI	I	AI	

INFORMAL PHONE LOG

Date	Prof. Initials	Name/Relationship to Child/ Child's Name	Caller		Purpose	Level of Involvement			
			Prof	Family		NI	SI	I	AI

Level of Involvement

NI = Not involved. Did not return call.

SI = Somewhat involved. By merely calling, parent starts out at this level. The call may not be related to child or program.

I = Involved. In order to be involved, the purpose of the call must be on child's needs or program.

AI = Actively involved. This level may require a time lapse since the parent must actively respond to professional's recommendation. OR family must assert self to require information. Remember that a time lapse may need to occur to determine AI.

APARTMENT/HOME VISIT LOG

Professional's name _____

Family and Child's Name _____

Roster	Not Involved	Somewhat Involved	Involved	Actively Involved	Comments
1.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
2.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
3.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
4.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
5.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
6.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
7.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
8.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
9.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
10.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	
11.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP CF G O	
12.	M F GP OF G O	M F GP OF G O	M F GP OF G O	M F GP OF G O	

74

73 M = Mother F = Father GP = Grandparent OF = Other Family G = Guardian O = If other includes stepparents, indicate who in comment section.

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Child's Name _____

Dear Parents,

Please take a few minutes to look over the class notes in the NOTES section of this book and discuss the class activity with your child inviting the child's participation. For each day that you complete this activity, please record your initials in the appropriate place on the form below and make a brief comment about the child's response. Comments may include such things as Mary pointed to two of the pictures and said, "I went down the slide. I went fast." or "Jimmy didn't like the cornbread."

Thank you for your cooperation in completing this form. Your input helps us in determining the value of these daily class notes.

CLASS NOTES LOG

Week of		Initials	Comments
_____	M	_____	_____
	T	_____	_____
	TH	_____	_____
	F	_____	_____

Week of		Initials	Comments
_____	M	_____	_____
	T	_____	_____
	TH	_____	_____
	F	_____	_____

This is an example of a data collection form which was designed by IPPP Staff to help ones TPS/EC professional collect level of involvement information.

Other meetings throughout the year served to (a) check reliability among TPS/EC Staff in recording level of involvement, (b) announce project changes and progress, and (c) discuss any issues related to the project.

IPPP--TAKE A DEEP BREATH!!

The Formal Activities Log is to be used for formal activities, i.e., those activities which involve a group of parents at one time. For example open house or workshops that you are doing.

The Apartment/Home Visit Log is for professionals involved in regularly scheduled home visits or apartment sessions, i.e., the Parent Educators and Socialworker. Ruth will transfer this data to the appropriate IPPP forms

The Therapy/Diagnostic/Informal/Interaction Log is for all contacts with parents not recorded on any other forms. As of now, It is not for recording informal communications. We will collect this data beginning October 9.

THE PHONE LOGS ARE IN USE!!! If you have any questions call Ruth or Colleen. If you have comments direct them to Ruth.

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IPPP Update

October 13, 1983

By now, the system for collecting data on all types of parent involvement is in place. Parent involvement activities on which we need data include:

- phone interactions
- formal activities (e.g. classes or group meetings)
- home/apartment visits
- all I.E.P. and other parent-teacher meetings
- parent-child classes
- parent participation in classroom activities
- parent volunteer activities (through Parents Plus, involvement in Parent-Staff Exchange, etc.)
- informal interactions with parents

If you've discovered holes or snags in the data collection process, please let us know.

Data collection forms can be forwarded to Ruth on a weekly or, at the latest, a bi-weekly basis. Extra data collection forms are available at several central locations:

(1) by the check-in sheet at Cherry
(2) under the phone at Carol's desk at McKesson
(3) under the phone by Ruth's desk at McKesson

Franklin teachers, we'll try to keep you well supplied via visits to your classroom and inter-school mail.

Two Important reminders:

#1. If you haven't already done so, please record data on your beginning-of-the-year meetings, with parents. We would like to have all this data in by Friday, October 14th.

#2. Please be sure to provide complete data on the IPPP forms, such as the child's name, family's name, and individual's relationship to the child.

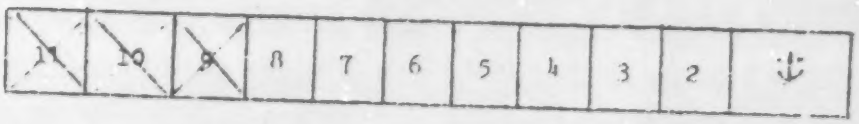
Upcoming Meeting:

Meetings to clarify issues and concerns related to data collection are set for Wednesday, October 19th. Please attend one of the following meetings:

9:45 - 10:45 at Cherry Preschool
11:00 - 12:00 at McKesson School

Rejoice!

There are only 8 more data-collection weeks before Christmas break!!!



Thank you for your input and cooperation!

Colleen and Ruth

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12-5-83

Quickie IPPP Memo

73

The first phase of data collection for the IPPP Project will be finished Dec. 9th! Please have all data collection forms in by Dec. 16th. Thanks so much!

We'd like to meet with you early in January to discuss possible changes in the data collection process, preliminary findings from the first half of the year, etc. Please plan to attend either a 9:30-10:30 meeting at McKesson or an 11:00-12:00 meeting at Cherry on Wednesday, January 11th.

Thanks for all the data-collection time and effort you invested in this project. We anticipate improved services to families resulting from the instruments and manual developed through this project.

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Notice

To: All Early Childhood Staff

Re: IPPP Meeting

When? Wednesday, Jan. 11, 1984
Where? Cherry Preschool 9:00 – 10:00
McKesson 11 – 12:00

→ Note time change from previous notice (Good Grief!?!)

Agenda: ① Data Collecting Hints
② Inter-Rater Reliability (What's that?)

Good News: Phase II of Data Collecting will start Jan. 23rd vs. Jan. 17th as originally scheduled. (An extra week to get back into the swing of things – whew!)

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BEST COPY AVAILABLE

TO: All Early Childhood Staff

FROM: Ruth Johnson

DATE: April 3, 1984

RE: IPPP Project

We owe you an apology ---

We hoped to give you some feedback on the parent involvement data collection process long before this. We figured wrong. The data-analysis maze is far more complex and time consuming than we anticipated. However, we will provide feedback to you. If we don't make it before June 6th, we will get something to you in writing over the summer.

A few reminders:

(1) March 30th marked the end of day-to-day data collecting. (Whew!) Please continue recording all personal activities, including IEP meetings, until the end of the school year. Thanks!

(2) By now, all teachers should have received (or have someone else working on) The Family Background Information Sheets. In completing these forms, please do not leave blanks. Don't be afraid to make educated guesses, where applicable. Indicate "unknown" only in cases where you cannot get (or guess) the information requested. Remember -- ask for help, if you need it!

(3) Please have all data collection and Family Background sheets completed and turned in by April 18th. We will then get off your backs for the rest of the year!

One more thing:

Colleen is very interested in getting some "first hand" experiences with the children and families in our program. She would love to spend time in May walking along with you in your work. She may be contacting you soon after break to set this up.

Thank you for your cooperation on this project!

Enjoy Spring Break!

RJ:js

Appendix D

Documentation of Search for Assessment Tools

DEVELOPMENT OF INSTRUMENT PACKAGE

During the first three to six months of the IPPP Project, several steps were used to obtain current tools used to assess various aspects of family involvement.

Requests for information on assessing parent involvement appeared in the DEC Communicator (Vol. 10, No. 1, 1983) and in the Ohio Division for Early Childhood (Vol. 1, No. 1, 1983). Both publications are included here.

THE COUNCIL FOR EXCEPTIONAL CHILDREN 78

DEC Communicator

Volume 10 Number 1 August-September, 1983

THE DIVISION FOR EARLY CHILDHOOD

PRESIDENT'S MESSAGE

What does this coming year look like for DEC?

In the spring of 1982 a questionnaire entitled "DEC: Where Are We Going?" was distributed at the DEC business meeting in Houston and again in the Communicator. Forty-eight members responded. Two major areas were identified for commendation and two others as a concern. Most statements about both DEC publications, the Communicator and the Journal, were very favorable with comments such as, "Excellent changes, congratulations!", and "Commendations are in order for the Journal." Public Policy through the Pan Network was also seen as well done.

Members were concerned, however, on the timeliness for delivery of the publications. This is currently being addressed by Merle Karnes, editor of the DEC Journal and Jeanette McCollum, editor of the DEC newsletter.

The area that surfaced as the primary concern was the need for greater representation by new members on the DEC board and the DEC activities. Many people felt it was important to inform the membership of the time and place of board meetings and to include new people on committees and in planning DEC activities. The time and place of the December board meeting will be on Sunday, December 11, 1983 prior to the DEC/HCEEP Conference in Washington, D.C. The time and room location will be posted in the Conference hotel lobby. Please attend if you are able or contact me if you are interested in becoming more involved in DEC.

In this coming year I hope that our efforts to maintain and develop new quality services for young children with special needs and their families will be strengthened through DEC activities. We all need to be aware of the impending and current legislation which will affect the quality of life for the children and families we serve. With knowledge of the issues we can work together to influence our elected policy makers and inform the public of the need for early intervention.

I am looking forward to a year that will offer DEC support at a state and local level and that will involve more members in division activities.

Bea Gold, President

Bea Gold

Accomplishments of DEC 1982-83

- Membership increased to over 2600 members
- Published and distributed Volumes 5 and 6 of the Journal of the Division for Early Childhood
- Expanded number of DEC state federations. There are now 16 states with recognized state federations
- Co-sponsored with HCEEP (Handicapped Children's Early Education Programs) the third annual HCEEP/DEC conference in December, 1982
- Honored Dr. William Swann and Ms. Rose Engel for distinguished service in behalf of early education of exceptional children
- Planned early childhood program for the CEC convention in Detroit, accounting for over 60 hours of convention time
- Published 3 issues of the DEC Communicator
- Assisted CEC governmental relations office in preparing testimony on early childhood issues and recommendations for the Senate Subcommittee on the Handicapped
- Cooperative planning for the 4th annual HCEEP/DEC conference to be held Dec. 12-15, 1983 in Washington, D.C.
- Contributed $500 to CEC to become a Unit Sponsor, helping to achieve the very important goals of CEC

1983 HCEEP/DEC Conference
December 12-15
Sheraton-Washington Hotel,
Washington, D.C.

The U.S. Office of Special Education Programs and the Council for Exceptional Children/Division for Early Childhood (DEC) are co-sponsoring the 1983 annual HCEEP/DEC Conference. The Conference will be held at the Sheraton-Washington Hotel, Washington, D.C., December 12-15, 1983. Presentations will address current professional issues related to early intervention, early childhood, services in newborn nurseries, developmental assessment, family intervention, and additional topics of interest.

Additional information on the program (which will be ready by the time you receive this newsletter) may be obtained from Mary Sheppard, Thomas Buffington Associates, 2710 Ontario Rd. NW, Washington, D.C. 20009. All members of DEC will receive a brochure/registration form by mail.

The Communicator Needs NEWS

The DEC Communicator needs information from YOU. News concerning special events, innovative programs, research activities . . . all are welcome! Ideas concerning issues that you would like to see addressed are also needed. Please send all information and ideas to Jeanette McCollum, Dept. of Special Education, 1310 S. 6th St., Champaign, IL 61820.

DEC Promotional Items Available

Three different types of items are available for use by state federations in promoting membership in DEC:

- Poster Display—Kay Lund, Chairperson of the Membership Committee, has a display board illustrating DEC's purposes and activities. The board is easily shipped through UPS. Contact Kay at P. O. Box 40400, 1010 E. 10th St., Tucson, AZ 85717.
- Brochures—Kay also has available a brochure which can be distributed by state federations.
- Newsletter—We usually have some extra copies of each *Communicator* which we will gladly share with states; these are good give-away items. Contact Jeanette McCollum at Department of Special Education, 1310 S. Sixth, University of Illinois, Champaign, Illinois 61820

NEW PROJECT NEEDS YOUR HELP!

A new federally-funded project designed to enhance parent participation in the educational programs of handicapped children is seeking information and/or materials from other programs to assist them in the implementation of this project. They have submitted the following description of what they hope to accomplish:

The involvement of parents in their handicapped child's educational programs is considered to be critical for child's development. Yet parental response to involvement opportunities available to them is generally poor. The Individualized Parent Participation Programs (IPPP) Project is an applied research activity designed to assist professionals in planning and implementing parent participation options that are sensitive to the unique characteristics of the family.

One of the first objectives of the IPPP Project is the development of an instrument package designed to identify factors related to different levels of parent involvement in various types of program options. To assist in the development of this Parent Needs Assessment Inventory, project staff is presently seeking parent participation/involvement assessment tools found to be helpful to other programs.

If you can offer some assistance, contact

Colleen Mandell, Ed.D.
Department of Special Education
Bowling Green State University
Bowling Green, OH 43403
(419) 372-0151

or

Ruth Johnson, M.Ed.
Toledo Public Schools Early Childhood Program
McKesson School
1624 Tracy
Toledo, OH 43605
(419) 666-5180

CALL FOR MANUSCRIPTS

The summer, 1984 issue of the Journal of the Division for Early Childhood will be a topical issue on the use of technology in Early Childhood Special Education. Technology may relate to special equipment for particular populations, or to more "generic" uses such as might be developed with microcomputers, etc. The deadline for submission for this summer issue is March 15, 1984.

Send two copies, double spaced and in APA format, along with a 100-200 word abstract, to: Merle B. Karnes, Editor, Journal of the Division for Early Childhood, Colonel Wolfe School, 403 E. Healey, Champaign, IL 61820.

UPDATE

State Federations of the Division for Early Childhood

As of April 14, 1983, 17 states had active DEC state federations. These included California, Colorado, Florida, Georgia, Illinois, Indiana, Kansas, Kentucky, Louisiana, Minnesota, New Jersey, New York, Pennsylvania, South Carolina, Virginia, West Virginia and Wisconsin.

An additional 15 states had indicated an interest in and/or had begun the process of achieving federation status. For those of you who live in these states but are unaware of these efforts, contact persons are listed below:

Alabama
Ms. Mary McLean
Special Education
1230 Haley Center Auburn Univ.
Auburn, AL 36849

Alaska
Mary Carr
Infant Learning Program
Alaska Treatment Center for Crippled Children & Adults
3710 E. 20th Ave.
Anchorage, AK 99504

Arizona
Dr. Jeanne McCarthy
Professor/Director
Project First Chance
Dept. of Special Education
University of Arizona
Tucson, AZ 84721

Arkansas
Barbara Semrau
Director
Focus on Children
2905 King St.
Jonesboro, AR 72401

Connecticut
Ms. Fran Tyluki
46 Fleetwood Ave.
Bethel, CT 06801

Iowa
Reid Zehrbach
Grant Wood Area Educ. Agency
4401 Sixth St. SW
Cedar Rapids, IA 52404

Michigan
Beverly Johnson
Supervisor for Early Childhood
Detroit City School District
5057 Woodward Ave.
Detroit, MI 48202

Montana
Susan Workman
Early Childhood Education
Dept. of Home Economics
Montana State University
Bozeman, MT 59717

Nebraska
Harlan Stientjes
Early Childhood Coordinator
ESU 7 SPED Cooperative
2476 33rd Avenue
Columbus, NE 68601

New Mexico
Dr. Stephen Stile
Special Education
New Mexico State University
Box 3AC
Las Cruces, NM 88003

Ohio
Ruth Johnson
835 Jefferson Dr.
Bowling Green, OH 43402

Utah
Kay Walker
UMC 68
Exceptional Child Cnt.
USU
Logan, UT 84322

Wyoming
Donna Hinds
Box 3224 U. Station
Laramie, WY 82071

Finally, the 18 states listed below are those which have a contact person only or whose efforts at forming federations are unknown. These states include Hawaii, Idaho, Mississippi, Missouri, New Hampshire, Massachusetts, D.C., New Hampshire, North Carolina, North Dakota, Oregon, Tennessee, South Dakota, Rhode Island, Texas, Vermont and Washington.

Dave Shearer, Chairperson of the DEC State Federation Task Force, would appreciate any assistance in locating active early childhood educators in these states who may have an interest in forming a DEC; he will be glad to help states in their efforts to do so. Contact Dave at: Exceptional Child Center, UMC 68, Utah State University, Logan, UT 84322.

Federation Announcement

The new New York State Division for Early Childhood has just formed and is looking for members and/or subscribers. The major purpose of the group is to form a statewide network of individuals who are interested in professional growth and advocacy in the area of early childhood handicapped education. The goals of the organization are as follows:

1. Promote, improve, and expand the education of young children across all categories of exceptionality.
2. Increase communication and knowledge between special pre-school programs and agencies within the state.
3. Encourage and promote professional growth and research as a means of creating better understanding of the problems related to exceptionality of young children.
4. To increase the DEC membership of the State CEC.

In order to achieve these goals, specific committees have been organized which include: Publications and Public Relations, Membership, and Legislative. Activities planned by the organization include:

—A newsletter providing information to members and subscribers about what is happening in the area of early childhood handicapped education throughout the state and nation.

—Development of conferences focusing on education of the young handicapped child.

—Formation of a group of members and subscribers from all disciplines and professions concerned about early childhood education for the handicapped in New York State.

A member must be an enrolled National CEC and DEC member, and is entitled to voting privileges. Member dues are $4.00.

A *subscriber* can be:

a) a person who is *not* a member of National CEC or

b) an agency wishing to keep informed via mailings and newsletters. The subscriber fee is $3.00.

Dues and fees should be sent to:

Dr. Ruth F. Gold
Coordinator of Special Education
Adelphi University
Linen Hall
Garden City, NY 11530

DEC Officers 1983-84

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Ms. Bea Gold
Child, Youth and Family Services
1741 Silverlake Boulevard
Los Angeles, California 90026
213/664-2937 (Office)

Past President
Mr. Talbot L. Black
TADS
Suite 500, NCNB Plaza
Chapel Hill, North Carolina 27514
919/962-2001 (Office)
919/967-9427 (Home)

President Elect
Dr. Warren Umansky
Program for Exceptional Children
University of Georgia
Athens, Georgia 30602
404/542-1685 (Office)

Vice-President
Ms. Corinne Garland
Pupil Personnel Services
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804/253-2422 (Office)

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Putnam/Northern Westchester BOCES
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Executive Director
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Pine Bluff, Arkansas 71603
501/534-2035 (Office)

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Institute for Child Behavior and Development
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Membership Committee Chairperson
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602/791-5107 (Office)

Governmental Relations Committee Chairperson
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501 Crescent Street
South Connecticut State College
New Haven, Connecticut 06515
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203/281-0507 (Home)

State DEC Federations Task Force Chairperson
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Exceptional Child Center
Utah State University
Logan, Utah 84322
801/750-1122 (Office)

Research Committee Chairperson
Dr. Kippy Abrams
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Tulane University
New Orleans, Louisiana 70118
504/865-5342 (Office)

Editor of Communicator
Dr. Jeanette McCollum
Department of Special Education
1310 South 6th Street
University of Illinois
Champaign, Illinois 61820
217/333-0260 or
333-7438 (Office)

Newsletter Deadlines

The DEC newsletter will be published three times each year, with members receiving issues (when all goes well!) at the end of September, January and May. Because of the time necessary for compiling and printing, and because we use 3rd class mail ($!!), any announcements, news or suggestions must be received by the editor by the 1st of August, December and April respectively. Send all items to Jeanette McCollum, Dept. of Spec. Educ., 288 Educ. Bldg., Univ. of Illinois, 1310 S. 6th St., Champaign, Ill. 61820

TEACHER PREPARATION PROGRAMS IN ECSE

Let the DEC Communicator Publicize Your Program!

The January-February issue of the Communicator will include descriptions of teacher preparation programs in ECSE. If you would like to have your program included, please send a short notice covering the major points: level, number of students, emphases, assistantships, length of program, unusual features, etc.

Send to: Jeanette McCollum, 188 Education, 1310 S. Sixth St., Champaign, IL 61820. I need these by the beginning of December.

NOTICE

The Publications Committee of the Council for Exceptional Children Announces SEARCH FOR AN EDITOR OF *EXCEPTIONAL CHILDREN*

The Council for Exceptional Children (CEC) is seeking an Editor for *Exceptional Children*, an official publication of CEC. We are seeking a highly respected special educator for this position, which will *not* be a line staff position at CEC headquarters but, rather, will be a professional appointment within the field of special education.

QUALIFICATIONS. The Editor must: have national standing as a special educator; have been a member in good standing of CEC for at least five years prior to making application for the Editorship; have wide knowledge of professional content and research in special education; demonstrate competence in writing and conducting research in special education; demonstrate competence in writing and conducting research, as well as effectiveness in the interactions necessary for working with the field to identify, stimulate, and elicit the preparation of relevant information for publication in the journal; possess a high degree of literary competence and have a record of success in writing and/or editing articles or books; have the ability to coordinate and work cooperatively with other editors, CEC members, the Publications Committee, the CEC Department of Information Services, and others; have the ability to provide leadership and to recognize essential topics that will stimulate positive change in special education; and be committed to the hard work of developing *Exceptional Children* as a publication of high quality and reputation that will help to shape the field of special education.

DUTIES AND RESPONSIBILITIES. Under the guidance of an approved policy statement for *Exceptional Children* and the general supervision of the Executive Director of CEC, the Editor will have complete responsibility for the advance planning, conceptualization, content and quality of the journal. Responsibilities include planning each issue; coordinating manuscript review; communicating with authors; and the overall management of the journal (*not* including matters of advertising, subscriptions, and print production, which will continue to be performed at CEC headquarters). With the concurrence of the Publications Committee, the Editor will recommend to the Executive Director of CEC up to six Associate Editors who will share responsibility for the content and quality of the journal. The Editor will also participate in a review of procedures for blind review of manuscripts, in the revision of procedures as necessary, and in the organization of a large group of Field Editors who will serve as reviewers of manuscripts submitted to the journal.

TENURE. The Editor will be named on February 15, 1984, for a tenure of three years, with option for renewal. Because the journal will have been forward planned for some months in advance of February, the first four months of the Editorship will consist of phasing into the position and collaborating with the staff of the CEC Department of Information Services and the Publications Committee. Full responsibility for the quality and content of the journal will commence as of July 1, 1964.

REIMBURSEMENT. The Editorship of *Exceptional Children* will be a professional appointment within the field, and will not be a salaried position. A budget for clerical, postal, telephone, travel, and related expenses will be established for the Editor.

APPLICATION PROCEDURES. Applicants must submit to the Chairperson of the Publications Committee *four* application packages, each containing the following: (a) a letter of application which explains the reasons that the applicant wishes to undertake this responsibility and the provisions that can be made at his or her place of employment to permit time for the successful completion of duties of the Editor; (b) a statement of the relationship between the applicant's credentials and the qualifications stated for the position; (c) a current vita; (d) a statement of the plans and improvements the applicant would project for the journal; (e) three letters of recommendation from individuals who can speak to the applicant's capabilities for this position; and (f) a portfolio containing samples of the applicant's published works.

Evaluation of applications will be conducted by the Chairperson of the Publications Committee, two additional members of the Publications Committee, and the Director of the CEC Department of Information Services. Names of finalists will be submitted to the Executive Director of CEC who will invite finalists to appear for interviews during the CEC Technology Conference in Reno, Nevada, during the last week in January 1984.

Applicants and other interested persons may obtain the complete plan for the Editorship of *Exceptional Children* by sending a *self-addressed envelope with 37¢* postage to the Chairperson of the Publications Committee. ADDRESS ALL APPLICATIONS AND INQUIRIES TO:

Judy Smith-Davis, Chairperson, CEC Publications Committee
c/o Counterpoint Communications Company
750 McDonald Drive
Reno, Nevada 89503 (702) 747-7751

NOMINATIONS SOUGHT FOR DEC OFFICERS

The Nominations Committee of the Division for Early Childhood is soliciting recommendations from the DEC membership for the offices of Vice President, Secretary and Representative to the Board of Governors.

Considerations for potential candidates include:

- Is the person a member of DEC?
- Does the person have the leadership qualities you want in a DEC officer?
- Is the nominee willing to accept the nomination?

All nominations should be referred as soon as possible to:

Tal Black, Chairperson
DEC Nominations Committee
TADS
Suite 500, NCNB Plaza
Chapel Hill, N.C. 27514

Upcoming Events

October 5-7, 1983	Northeast International Symposium for Exceptional Children and Youth, Bangor, Maine. Contact Kathleen Powers, Center for Research and Advanced Study, 246 Deering Ave., Portland, ME, 04102.
November 3-5, 1983	The Association for Severely Handicapped (TASH), Cathedral Hill Hotel, San Francisco, CA.
November 3-6, 1983	National Association for the Education of Young Children (NAEYC), Atlanta Hilton, Atlanta, GA.
November 5, 1983	Parents and Professionals Interact. Major issues regarding young children with special needs: team building, administration, family dynamics. Contact Lorraine J. Maddalena, 77 Hunter Avenue, Miller Place, NY 11764
November 5-7, 1983	Down's Syndrome Congress, Chicago, IL. Contact the Congress at 1640 W. Roosevelt Rd., Chicago, IL 60608.
November 17-18, 1983	Conference on Severe Behavior Disorders of Children and Youth, Arizona State University, Tempe, AZ. Contact R. B. Rutherford, Dept. of Special Education.
December 2-4, 1983	Infants Cannot Wait: Clinical Challenges of the Eighties. Third biennial national training institute, National Center for Clinical Infant Programs, Washington Hilton, Washington, D.C.
December, 1983	National Early Childhood Conference (HCEEP/DEC), Sheraton-Washington Hotel, Washington, D.C., during week of December 12. (Further information included in another section of this newsletter).
January 25-28, 1984	National Conference and Training Workshops on Technology in Special Education, Reno, Nevada. Will feature a wide variety of presentations and exhibits, as well as intensive skill training. Co-sponsored by CEC and CASE/CEC. Contact Elsa Glassman or Josephine Barresi, Council for Exceptional Children, 1920 Association Drive, Reston, Virginia 22091, 703-620-3660.
February 8-10, 1984	Research in Action, Institute for Child and Family Studies, Lubbock, TX. Contact Jamie Tucker at the Institute, Texas Tech University, Box 4170, Lubbock, TX 79409.
April 4-7, 1984	Biennial International Conference on Infant Studies (ICIS), Vista International Hotel, New York, NY.
April 23-27, 1984	Council for Exceptional Children (CEC), Washington, D.C.
August 26-30, 1984	International Congress of Audiology, University of California, Santa Barbara, CA 93106.

DEC COMMUNICATOR
403 E. Healey
Champaign, Illinois 61820

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ODEC

Newsletter

No. 1

Fall, 1983

ODEC (Ohio Division for Early Childhood is a newly activated state division of the Council for Exceptional Children (CEC). The Primary purpose of this organization is to promote comprehensive delivery of quality services for exceptional infants and young children and their families in the state of Ohio.

Message from the President

Ohio has much to be proud of in the scope and quality of its services to young children with special needs. Excellent programs do exist and are making a significant difference in the quality of life for many young exceptional children and their families. A number of universities are offering early childhood courses designed to prepare teachers, in both regular and special education programs, for the challenging work of early identification and appropriate intervention for young children with special needs. Professionals involved in interdisciplinary and interagency ventures are enhancing the scope and quality of early intervention programs through their cooperative efforts to bridge the gaps and eliminate the duplication of services to young exceptional children.

Yet, there can be no doubt that much remains to be done. Quality services for young children with special needs exist in some areas of Ohio but not in others. Financial insecurity, an overload of families to be served, and the feeling of isolation are typical problems faced by many programs serving young children with special needs. Lack of public awareness as to the importance of early identification and a lack of understanding as to the multifaceted needs of young exceptional children and their families are other real concerns of professionals working in the area of early intervention.

This is where ODEC comes in. ODEC consists of a dedicated group of individuals firmly convinced of the value of early intervention. This dedicated group of people are aware of the need for more public awareness and support, more comprehensive programs, and more opportunities for sharing of ideas and resources. These people have joined forces to make their dreams for exceptional infants and young children a reality in Ohio. The dedicated group of people in ODEC intend to make a difference in the field of early intervention.

It's a joy and privilege to work with such a positive group of people.

Ruth Johnson, President

Brief History of ODEC

On March 1, 1983 a group of individuals interested in activating an Ohio Division for Early Childhood met at the Northwest Ohio SERRC to outline goals, objectives, and procedures. A general theme emerging from the discussion on goals and objectives was that ODEC should become a vehicle for serving professionals from a variety of disciplines and organizations concerned with young exceptional children and their families. A sub-committee of individuals, headed by Ruth Fisher, took the initiative in drafting a constitution for the proposed organization. Another tangible outcome of this task

force meeting was the development and dissemination of a flyer for recruiting charter members. Response to this flyer was overwhelmingly positive.

The next step in the process of activating ODEC was conducting an organizational meeting on May 13th, 1983 at the Central Ohio SERRC. The meeting was chaired by Ruth Johnson with about thirty interested people in attendance. During this meeting, the proposed constitution was adopted and officers were elected.

The name and addresses of officers for 1983-84 are as follows:

President: Ruth Johnson
McKesson School
1624 Tracy Rd.
Toledo, Ohio 43605

Vice President: Ruth Fisher
The Developmental Preschool
2539 Dalton Rd.
Akron, Ohio 44313

Secretary: Rosalind Williams
Nisonger Center
Ohio State University
275 McCampbell Hall
Columbus, Ohio 43210

Treasurer: Alice Christie
University of Akron
127 Carroll Hall
Akron, Ohio 44325

Ruth Roberts from the University of Akron, was appointed chairperson of the Legislation Committee.

The dues for ODEC membership was then set at $5.00 per year.

Two ODEC executive board meetings have been held since the organizational meeting in May. By-Laws for the organization have been drafted and a campaign is underway for recruitment of additional members.

Next Steps for ODEC

ODEC is sponsoring a program and general membership meeting from 1:30 - 3:00 at the OFCEC convention on November 17, 1983. The program will consist of a panel discussion on identifying issues faced by early childhood educators in Ohio and finding positive ways of dealing with such problems. The meeting is open to anyone interested in early intervention issues.

The annual business meeting for ODEC will be scheduled for sometime in May, 1984.

A special project being pursued by ODEC at the present time is the drafting of a paper on the state of early intervention in Ohio today. One purpose of such a paper is to generate public awareness as to the nature of early intervention and to inform the public as to what programs currently exist in Ohio. Rosalind Williams is assuming responsibility for coordinating this project. Your ideas and assistance are welcome! You may wish to send information about your project to Rosalind Williams at the Nisonger Center, Ohio State University, 275 McCampbell Hall, 1580 Cannon Drive, Columbus, Ohio 43210

Opportunities for Personal Involvement

Opportunities abound for every ODEC member to become actively involved in the organization.

Options for involvement include:

- assisting in recruiting members
- serving on a standing committee (standing committees are Membership, Publications, Nominations & Elections, and Legislation)
- organizing local meetings and/or workshops
- submitting articles for the newsletter
- increasing visibility of the organization
- making hospitality arrangements for convention and business meetings

Need any ides on how to go about any of the above? Call Ruth Johnson.

Work Phone: (419)666-5181
Home Phone: (419)352-3098

The Ohio Division for Early Childhood

intends to make a difference!

* * * * * * * * * * * * * * * *

Become a part of the action by joining this

newly organized division

in a round-table discussion on:

1. Identifying the issues faced by early childhood educators in Ohio

and

2. Determining what can be done to deal with such problems.

Presenters leading this discussion will be:

Carol Quick, Supervisor

Toledo Public Schools Early Childhood Program

Barbara Munich-Deger, Coordinator

Preschool Education, Hopewell SERRC

Joe Todd, State Department of Education

Division of Special Education

Ruth Johnson, President, O.D.E.C.

will serve as moderator of this discussion.

November 17, 1983
1:30 - 3:00
Columbus, Ohio
Sheraton Columbus Plaza

Membership Information

Full participating membership in ODEC requires membership in The Council for Exceptional Children (CEC) and the International Division for Early Childhood (DEC). Membership applications for these organizations can be obtained from:

Alice Christie, ODEC Membership Chairperson
University of Akron
127 Carroll Hall
Akron, Ohio 44325
or
C.E.C. Headquarters
1920 Association Drive
Reston, Virginia 22091

Dues for CEC are $45. (regular) or $20 (student). Dues for International DEC are $10. (regular) or $5. (student).

Individuals already members of CEC and DEC can join ODEC by completing the enclosed application form and remitting $5. dues. Additional membership information can be obtained from Alice Christie (address above) or Ruth Johnson (McKesson School, 1624 Tracy Rd., Toledo, Ohio, 43605 - (419) 666-5181. (Why not join with a friend? Enclosed are extra application forms.)

Individuals who are not members of CEC and DEC but wish to be on the ODEC mailing list can contact Ruth Johnson or Alice Christie for information.

Upcoming Events

Nov. 17-19, 1983
Ohio Federation Council for Exceptional Children
Columbus, Ohio

ODEC Program (1:30 - 3:00) (Nov. 17)
Open to Everyone!

Dec. 12-16, 1983
National Early Childhood Conference (HCEEP/DEC)
Washington, D.C.

April 23-27, 1984
Council for Exceptional Children (CEC) Washington, D.C.

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News from other Programs

The IPPP Project (Individualizing Parent Participation Programs) is an applied research activity being implemented by Bowling Green State University's Department of Special Education and Toledo Public School's Early Childhood Program.

This research project evolved from the need for doing something about the lack of parental involvement in their handicapped child's educational program. The IPPP Project is designed to assist professionals in planning and implementing parent participation options that are sensitive to the unique characteristics of the family and are thus more likely to elicit active parent involvement.

One of the first objectives of the IPPP Project is the development of an instrument package designed to identify factors related to different levels of parent involvement in various types of program options. To assist in the development of this Parents Needs Assessment Inventory, project staff is presently seeking parent participation/involvement assessment tools found to be helpful to other programs. Information about such assessment tools, as well as other related materials, can be addressed to:

Colleen Mandell, Ed.D.
Department of Special Education
Bowling Green State University
Bowling Green, OH 43403
Phone: (419) 372-0151

* If you would like news about your program featured in this newsletter or if you are in need of information from other professionals, you can send the information to be printed to Ruth Johnson, McKesson School, 1624 Tracy, Toledo, Ohio 43605.

Current Issues

Early Childhood Teacher Certification

A new version of a bill allowing for the certification of pre-kindergarten teachers has been introduced in the Ohio legislature. Passage of this bill, Senate Bill 218, would direct the State Board of Education to establish standards of qualification for pre-K teaching certification and to monitor institu-

tions with training programs for pre-K teachers. Passage of this bill would not require an individual to hold a certificate for teaching in a pre-K program.

Many early childhood educators feel that pre-K certification is an important step in the right direction for providing appropriate learning experiences for young children in early childhood programs. Rallying support for Senate Bill 218 would be in the best interest of all young children, including those with special needs. Letters and calls requesting a prompt hearing and support of the bill can be directed to Oliver Ocasek, Chairperson of the Senate Education & Retirement Committee. The address is Ohio Senate, Statehouse, Columbus, OH 43215.

LEGISLATIVE ALERT!

Programs and Services for Ohio's Young Handicapped Children Endangered...

Issues 2 and 3 in Ohio's November election have some grave implications for maintaining services for young handicapped children. Issue 2 calls for the repeal of state taxes recently passed by the Ohio legislature. Issue 3 would require a three fifths majority vote of the legislature in order to raise state taxes in the future.

Should Issue 2 pass, Ohio's fiscal base will be reduced by twenty per cent. The ten per cent property roll back provision will still be in effect. According to some economists, the net effect of this action would be a 1969 tax base for 1984 services.

Not all programs would be reduced equally. For instance, it will not be possible to cut dollars from the penal or court systems. The programs that will be most devasted will be those in the human services areas: medical, social, and education.

Ohio has a mandate to provide a free appropriate education for all handicapped children from five to twenty one. However, as the total number of education dollars dwindle, questions as to the definition of "appropriateness" will emerge. One can assume litigation will follow at the expense of both taxpayer and our children. Attitudes on the part of parents of children enrolled in regular school programs toward costs of providing special education probably will become less than positive, as both regular and special education programs are placed in a "competitive" situation for too few dollars.

For young handicapped children, the picture becomes even darker. Currently, in Ohio, programs and services for preschool children funded through the department of special education are permissive. Programs for these young children will become increasingly vulnerable, as available dollars will be funneled into those services which are mandated. The paradox in all of this is that research in Ohio and across the nation attests to the cost effectiveness of early intervention in ameliorating the impact of handicapping conditions.

It is imperative that we become active in defeating Issues 2 and 3 on the Nov. ballot. Ohio has much to lose--Programs for our young handicapped children are truly endangered!

ODEC Newsletter
835 Jefferson Drive
Bowling Green, Ohio 43402

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Appendix E

Documentation of Local Search Activities

Bowling Green State University

Department of Special Education
Bowling Green, Ohio 43403
Phone (419) 372-8151
Cable BGSUOH

Dear Program Implementer,

I'd like to share some information with you about an exciting project dealing with services for parents and their young children. This project is called the Individualized Parent Participation Programs (IPPP) Project.

It is a federally funded grant awarded to Bowling Green State University and is designed to look at factors related to parents' involvement in their child's educational program. One of the major objectives of this project is to develop a system for individualizing parent programs that are sensitive to the unique characteristics of the family.

Parenting young children with special needs is demanding and often requires the involvement of many professionals. I'd like to invite you to participate in a round table discussion with the IPPP staff and other key professionals, such as yourself, who represent different parent/child programs in our community. The purpose of this discussion is for us to exchange information about issues, needs, and services related to families of young children in the greater Toledo area.

I hope that you will be able to participate in this program. We will be meeting on Thursday, November 3rd from 1:00 - 3:00 p.m. at McKesson School, 1624 Tracy, Toledo, Ohio 43605. Please call Joan at McKesson by October 28th, if you plan to attend this meeting (666-5181).

I'm looking forward to seeing you.

Sincerely,

Colleen Mandell, Ed.D.
I.P.P.P. Project Director

CM:js

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Philip Amadio
St. Charles Hospital
2600 Navarre Avenue
Oregon, Ohio 43616

Mary Beauregard
Ryder School
Ryder Early Education Ctr.
3117 Nebraska Avenue
Toledo, Ohio 43607

Nancy Bowman, O.T.
Pediatric Outpatient
Therapy of Toledo
Hospital
3020 Marvin
Toledo, Ohio 43606

Dr. Evan Cohen
Community Mental Health
Center, West
4853 Monroe Street
Toledo, Ohio 43623

Ann Cole
Model Day Care
Jefferson Center
1300 Jefferson Avenue
Toledo, Ohio 43624

Mary Cowie
Special Needs
Head Start
124 W. Woodruff Street
Toledo, Ohio 43624

Mr. Ryan Dybdahl
Zeph Community Mental
Health Center
1614 South Byrne Rd.
Toledo, Ohio 43614

Janet Freeman
Parent Involvement
Head Start
124 W. Woodruff Street
Toledo, Ohio 43624

Lois Golpfert
Miami Childrens Home
2500 River Road
Maumee, Ohio 43537

Julie Guminek
East Center for
Mental Health
1425 Starr Avenue
Toledo, Ohio 43605

Mary Hanley
Infant Stim.
Family Life Education
Manhattan & Elm
Toledo, Ohio 43608

Dr. Jerry Higgins
Speech/Language Pathology
Toledo Hospital
2142 North Cove Blvd.
Toledo, Ohio 43606

Ruth Johnson
835 Jefferson Drive
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Sue Kelsey
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Carole Smith
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Joel Smith
Cummings-Zucker Center
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Laura West
Cummings-Zucker Center
123 22nd Street
Toledo, Ohio 43624

Sandy Wright
Toledo Society for the
Handicapped
5605 Monroe Street
Sylvania, Ohio 43560

Appendix F

Documentation of Search at Conferences

IPPP
Abstract

The involvement of parents in their handicapped child's educational progra. is considered to be extremely important for that child's development. Yet, parental response to involvement opportunities available to them is generally poor. The IPPP Project is designed to assist professionals in planning and implementing individualized parent participation programs as a basis for increasing parent involvement.

An interagency approach to resolving the problem of little or no involvement on the part of many parents in their handicapped child's educational program in one of the salient features of the IPPP Project. The Department of Special Education at Bowling Green State University proposes to work cooperatively with Toledo Public Schools Early Childhood Program in developing an organized system for planning and implementing parent participation programs that are sensitive to the specific needs of individual families. Additional interagency input is anticipated through the establishment of an active parent - professional advisory board.

Major activities of the IPPP Project include the following;

1. the development of an Instrument Package designed to identify factors related to different levels of parent involvement.

2. the collection and anlysis of data, via the Instrument Package, to identify level of involvement parent profiles in various program options which will assist professionals in developing an Individualized Parent Participation Program (IPPP) for each family involved with a handicapped child.

3. the dissemination of project findings an IPPP manual developed for professional use, and recommendations to relevant local, state, and national agencies involved with the education and/or development of handicapped children.

Individualizing Parent Participation Programs

The involvement of parents in their handicapped child's educational program is considered to be critical for child's development. Yet parental response to involvement opportunities available to them is generally poor. The Individualized Parent Participation Programs (IPPP) Project is an applied research activity designed to assist professionals in planning and implementing parent participation options that are sensitive to the unique characteristics of the family.

One of the first objectives of the IPPP Project is the development of an instrument package designed to identify factors related to different levels of parent involvement in various types of program options. To assist in the development of this Parent Needs Assessment Inventory, project staff is presently seeking parent participation/involvement assessment tools found to be helpful to other programs. Information about such assessment tools, as well as other related materials, can be addressed to:

Colleen Mandell, Ed.D.
Department of Special Education
Bowling Green State University
Bowling Green, OH 43403
(419) 372-0151

or

Ruth Johnson, M. Ed.
Toledo Public Schools Early Childhood Program
McKesson School
1624 Tracy
Toledo, OH 43605
(419) 666-5180

Appendix G

Assessment Tool Resource File

Resource File
IPPP Project

The Life Skills Training: A Program for Parents and Their Learning Disabled Teenagers. Contact: Closer Look, 1201 16th St., Washington, D.C. 20036

A program guide for workshop leaders. The goal of the workshop program is to train parents to help their learning disabled teen or young adult increase daily living and social skills in preparation for successful independent living. Workshop activities are focused on building awareness and skills and are centered around: Parent/team building; listening and body language; self inventory of daily living; social and parenting skill needs; task analysis and problem solving.

Parent Questionnaire. Contact: BOCES Preschool Program, Put./No. Westchester BOCES Project Building, Yorktown Heights, NY 10598

A questionnaire used to evaluate parent reactions to the BOCES preschool program. The basic purpose is to provide a description of how the program is functioning-its accomplishments, constraints and concerns.

Parent Questionnaire. Contact: PEERS Project, 1211 Chestnut St., Philadelphia, PA 19107

A parent questionnaire to approximate parents' feelings about their life with a handicapped child.

Background Information. Contact: DEBT Gospel, Lubbock Independent School District, Lubbock, TX 79408

A parent questionnaire for information on family history, prenatal history, labor and delivery, child's medical history, and developmental history.

Parent's "Help Wanted" Questionnaire. Contact: D.C. Society for Crippled Children, 2800 13th St. N.W., Washington, D.C. 20009

A questionnaire in which parents answer questions asking whether they would like help in the areas of: motor development, sleep, feeding, bathing and hygiene, language development, and social developing in the beginning of the school year. At the end of the year they answer the "Help Received" questionnaire.

Parent's "Help Received" Questionnaire. Contact: D.C. Society for Crippled Children, 2800 13th St. N.W., Washington, D.C. 20009

A questionnaire in which parents answer questions in areas in which they expressed a desire for help, to show whether they were helped, not helped or need more help. These areas are: motor development, sleep, feeding, bathing and hygiene, language development and social development.

Parent Questionnaire. Contact: Toledo Society for the Handicapped, 5605 Monroe, Toledo, Ohio 45505

A questionnaire in which parents are asked to check what topic areas they are interested in, what group or sessions they would be interested in, and other questions about participation in the groups. A question of interest in a Personal Direction Service will: a) assist parents to identify the special needs of their child and of the family, b) direct the family to a full range of services to meet these needs and follow them over time, and c) assist the parent and child to become independent in meeting the child's needs.

Awareness Materials. Contact: Louise M. Bridges, Assistant Director, Family Centered Resource Project, Albright College, P.O. Box 516, Reading, PA 19603

A description of services that discuss the theoretical approach, identify training audiences, outline training objectives and time frame, and suggest benefits that can accrue to staff and clients.

Parent Scales. Contact: Project RHISE, Children's Development Center, 650 N. Main St., Rockford, IL 61103

A form completed by each parent at the time of entry into the program and annually thereafter. Parents indicate his/her feelings with respect to understanding of normal child development, his/her own child's developmental status and needs, parenting skills and toward his/her spouses reactions to having a handicapped child.

Professional's Assessment of Parent Needs and Progress. Contact: Children's Development Center, 650 N. Main St., Rockford, IL 61103

A form to be completed by staff to give their feelings concerning the parents' greatest needs to provide a program for the parents of the children.

Parent Questionnaire. Contact: Project RHISE/Outreach (Rockford Handicapped Infant Services Expansion), Children's Development Center, 650 N. Main St., Rockford, IL 61103

A form to be completed by each parent at the time of entry into the program. The purpose is for the parent to indicate his/her own assessment of needs with respect to understanding of normal child development. The form is to be re-administered at periodic intervals to help in assessing the progress made by each individual parent.

Parent Needs and Involvement Survey. Contact: Carolina Institute for Research on Early Education of the Handicapped, Frank Porter, Graham Child Development Center, Suite 300, NCNB Plaza, University of North Carolina, Chapel Hill, NC 27514

A questionnaire to gather information on parent involvement in the program, goals of parents involvement, barriers to parent involvement and information about the parents and the family.

Parent Survey. Contact: Carolina Institute for Research in Early Education for the Handicapped. Dr. Wiegerink, Frank Porter Graham Child Development Center, University of North Carolina, Suite 300, NCNB Plaza Building, Chapel Hill, NC 27514

A survey that gathers information about the child, transportation and home visits, parent activities, advisory board, and about the parents.

Parent Involvement Studies. Contact: Carolina Institute for Research on Early Education of the Handicapped, Frank Porter Graham Child Development Center, Suite 300, NCNB Plaza, University of North Carolina, Chapel Hill, NC 27514

A form completed by staff about the extent of parent involvement, the goals of parent involvement, barriers to parent involvement, and additional information.

Skills Inventory for Teachers, Staff Assessment Device (Educational Projects for the Exceptional Child, p. 86) Oryx Press, 1981. Contact: Corine Garland, Child Development Resources, Williamsburg, VA 23185

A questionnaire which assesses needs for staff development within a home-based program serving handicapped infants and their families. It evaluates observable behavior and skills of the home visitors/case managers, who may be teachers or other members of a team of professionals. Cost: $3.00

Log Keeping for Parents, Training Book (Educational Projects for the Exceptional Child, p. 72) Oryx Press, 1981. Contact: Dr. Dennis Knapczyk, Instructional Materials Center, Bloomington, IN 47401

A book which shows how parents of developmentally disabled children can use logs to record their children's behavior and interactions with other family members so they can provide specific and detailed information to professionals working with the children. This book is designed to supplement any guidelines that professional counselors may provide to parents. It contains an introduction to the principles of logging and detailed examples that can be used by parents after conferring with a professional counselor. No charge

Begin at the Beginning, Program Guide (Educational Projects for the Exceptional Child, p. 72) Oryx Press, 1981. Contact: Benith MacPherson, The Capper Foundation for Crippled Children, Topeka, KS 66604

A handbook for expanding early education program for orthopedically handicapped children in the areas of: (1) objective measurement of progress; (2) parent involvement; (3) infant program; and (4) team approach to teaching and treatment. Cost: $5.00

Parent Teaching Skills Checklist, Assessment of Parent Teaching Skills (Educational Projects for the Exceptional Child, p. 72) Oryx Press, 1981. Contact: Cordelia Robinson, Meyer Children's Rehabilitation Institute, University of Nebraska Medical Center, Omaha, NE 68131

An 18-item rating scale used to measure the teaching skills of parents in home-based programs with handicapped infants. A trained teacher observes parent-infant interaction and rates the parent on skills across a wide range of task situations and instructional approaches. They include presentation of task, shaping child responses, and responsiveness to child. Cost: $.20

Perceptions of Developmental Skills, A Multisource Rating Profile of Functional Capabilities for the Preschool Child (Educational Projects for the Exceptional Child, p. 549) Oryx Press, 1981. Contact: Carol Cartwright and John Neisworth, Pennsylvania State University, Williamsburg, PA 16802

A screening instrument for organizing the judgments and subjective impressions of significant adults about a handicapped preschooler's range of functional skills. Cost: $2.65

Parent Involvement, Manual for Teachers of Exceptional Preschoolers (Educational Projects for the Exceptional Child, p. 536) Oryx Press, 1981. Contact: Jack Hailey, Circle Preschool, Piedmont, CA 94611

A booklet which contains programs and outlines designed to help teachers work with the parents of exceptional children ages 2½ to 5 years. It presents Circle Preschool's philosophy for parent involvement, dicusses parent conferences, presents outlines for four parent workshops on parent-child interaction, discusses the ways teachers can assist parents to locate social services, and presents formats for evaluating parent satisfaction with a program. Cost: $2.00

Skills Inventory for Parents of Handicapped Babies, Assessment Device (Educational Projects for the Exceptional Child, p. 608) Oryx Press, 1981. Contact: Corinne Garland, Child Development Resources, Williamsburg, VA 23185

An instrument which evaluates and measures changes in skills needed by parents of handicapped children from birth to 2 years of age. It rates 115 items in 7 knowledge and skill areas related to child care, teaching, and advocacy. It is used to identify needed skills and to plan and evaluate training activities for the parents. Cost: $3.00

TETC Skills Assessment, Assessment Instrument (Educational Projects for the Exceptional Child, p. 647) Oryx Press, 1981. Contact: Dr. William Hoehle, Southeast Mental Health and Retardation Center, Fargo, ND 58102

A hierarchy of developmentally appropriate behaviors designed to determine a preschool child's functioning level in four years of development: language-cognitive, personal-social, gross motor, and fine motor.

Working with Parents: Individualizing Needs, 1981 (What's Where? p. 107) developed by HPEEC Projects. Contact: WKEC-PEEEC, Murray State University, Murray, KY 42071

A manual which includes a rationale for parent involvement and the philosophy of the PEEEC Program, explains the Family Needs Assessment, utilized by PEEEC to establish individual family objectives and also describes strategies used to meet the objectives. Cost: $5.43

Instruments From Family Training Program for Atypical Infants and Children, Parent Assessment and Evaluation Devices (Educational Projects for the Exceptional Child, p. 848) Oryx Press, 1981. Contact: Sister Rachael Marie Cantalician, Center for Learning, Buffalo, NY 14214

Three assessment devices which assess various aspects of parent-infant interaction, including parents' knowledge, awareness, coping behavior, and care-giving skills. They help plan goals for a curriculum in a developmentally family-oriented program to promote development in handicapped or delayed infants and young children. Administered at the beginning and again at the end of the program, they measure change in parent behavior and understanding. Cost: $1.50

Working With Families, 1976 (What's Where? p. 106) developed by HPEEC Projects. Contact: Kaplan Press, Winston-Salem, NC 27103

A manual for planning and implementing positive family participation in child development programs contains information on parent needs, numerous detailed suggested strategies for involving families, additional readings and sample forms. Cost: $11.90

Two Emerging Models of Parent-Training: General and Problem-Specific, 1981 (What's Where? p. 103) developed by HPEEC Projects. Contact: Early Childhood Institute, University of Kansas, Lawrence, KS 66045

A paper which discusses the development of: (1) intervention methods for specific problem behaviors experienced by children and families, and (2) intervention techniques for treating comprehensive family interaction problems. Cost: $2.75

Teaching Parents to Teach, 1976 (What's Where? p. 98) developed by HPEEC Projects. Contact: Walker Educational Book Corp., New York, NY 10019

A guide which presents practical suggestions from psychologists and educators for organizing parent-involvement activities, especially for early childhood special education programs. Cost: $13.81

Project KIDS Family Involvement Package, 1976 (What's Where? p. 82) developed by HPEEC Projects. Contact: Project KIDS, Dallas, TX 75219

A package which includes a description of the family involvement program, a list of parent competencies, a Self-Assessment Inventory, a listing of training activities and an evaluation of the family involvement program. Cost: $5.25

The Parent Volunteer System: Manual and Activity Catalog for Teachers, 1980 (What's Where? p. 68) developed by HPEEC Projects. Contact: Regional Program for Preschool Handicapped Children, Yorktown Heights, NY 10598

A manual and activity catalog which are used to train teachers in a system of involving parents as volunteers. They include samples of instructions for parents, suggested group activities and suggested parent orientation and training sessions. Cost: $10.00

Parent Needs and Strengths Assessment, 1981 (What's Where? p. 68) developed by HPEEC Projects. Contact: Pediatric Intervention Program, Sonoma State University, Rohnert Park, CA 94928

A handout which assess parent's knowledge, skill, rating of importance and preferred method of receiving information in the areas of: education, child development, support, and legal issues. It is useful in program evaluation after use as a needs assessment. Cost: $2.00.

Parent Program Manual, 1980 (What's Where? p. 67) developed by HPEEC Projects. Contact: Project WISP/Outreach, Laramie, WY 82071

A "how-to" manual which includes information on: the role of the parent coordinator, parent orientation and identification of needs, parent education plan, home visits, parent meetings and reproducible data-gathering forms. Cost: $3.50

Individualizing Parent Involvement, WESTAR Series Paper 3, 1979 (What's Where? p. 45) developed by HPEEC Projects. Contact: ERIC Document Reproduction, Arlington, VA 22210

A paper discussing five components: (1) hints for determining parent needs, (2) family checklist, (3) activity list, (4) comments on activity list and evaluation ideas, and (5) a form for recording parent activities. Cost: $4.56

PEECH Parent Questionnaire (Gathering Information from Parents, p. 27) TADScripts, 1981. Contact: PEECH Project, Colonel Wolfe School, Champaign, IL 61820

A questionnaire designed to assess parent's perceptions: (1) of the quality and impact of services provided to their children and (2) of their own involvement in the parent program. It consists of a series of yes/no questions, rating scale items, and open-ended items describing child progress and parent involvement.

Skills Inventory for Parents (described in Gathering Information from Parents, p. 22) TADScripts, 1981. Contact: Child Development Resources, Lightfoot, VA 23090

An assessment device which measures changes in skills that result from both group and individual programs offered to parents in a home-based prescriptive infant program. It also offers guidelines for setting behavioral goals for parents that can be addressed by program activities. The SIP is divided into seven parts, each representing an area of parental skill that may affect the success of the program and/or the child's growth and well being. Cost: $5.00

The Professional's Assessment of Parent Needs and Progress (Gathering Information from Parents, p. 9) TADScripts, 1981. Contact: Project RHISE/Outreach, Children's Development Center, Rockford, IL 61103

A tool which identifies parent training needs in nine areas and is first completed by several program professionals. Then the parent programmer summarizes all of the information collected by professionals. In this way, the primary program needs of the parents are determined. Possible parent needs: understanding of normal child development, relationship with child, and realistic outlook for child's future. Respondents rate mother and father separately on each item. No charge

Readiness Levels of Parents (Gathering Information from Parents, p. 20) TADScripts, 1981. Contact: Project RHISE/Outreach, Children's Development Center, Rockford, IL 61103

An assessment device which assists in establishing appropriate expectations for parents, highlighting parent progress, and encouraging more parent involvement with intervention actions. No charge

Home Observation for Measurement of the Environment (Home) (Gathering Information from Parents, p. 12) TADScripts, 1981. Contact: Center for Child Development and Education, University of Arkansas at Little Rock, Little Rock, AR 72204

An instrument for measuring the child's early developmental environment. It is comprised of yes/no items designed to sample the social, emotional, and cognitive support available in the child's home. Completed during a home visit when the child is awake and can be observed interacting with the primary care giver. Cost: $12.00

Parent Questionnaire Preschool Handicapped Program (Gathering Information from Parents, p. 25) TADScripts, 1981. Contact: Board of Cooperative Eduational Services, Yorktown Heights, NY 10598

A questionnaire which allows parents to evaluate the program with anonymity in five major domains. The questionnaire consists of checklists, rating scales, and detailed instructions. Five areas: understanding, attitudes, perceived change in child, involvement in the program, and open-ended questions. No charge

Needs Assessment, Parent Questionnaire. Contact: Karen Ortiz, Sunshine Preschool, Developmental Disabilities Council, Inc., Region 10, P.O. Box 134, Delta, CO 81416

A questionnaire designed to individualize parent involvement in special education preschool. Areas covered, answered "very interested," "somewhat interested," or "not interested": (1) how can I help my child's growth, (2) health and safety, (3) family living, (4) eduation, (5) some other things parents would like to know about, and (6) what areas of the program parents would be interested in becoming involved in.

Parent Interview Form. Contact: Project RHISE/Outreach (Rockford Handicapped Infants Service Expansion) Children's Development Center, 650 N. Main St., Rockford, IL 61103

A form designed to be administered to the parents of children who have been referred to this program. The majority of the information will be obtained via interview conducted by the psychologist after a developmental delay has been found. It is designed to assist in assessing the parent's information and attitudinal needs with regard to their developmentally delayed child, and to supply demographic and family history information for the Project RHISE research paradigm.

Child Behavior Checklist. Contact: Project RHISE/Outreach, Children's Development Center 650 N. Main St., Rockford, IL 61103

Designed to help the parent learn effective observation techniques in order to assist their child in developing behaviors which will lead to more effective and efficient learning. It is designed for use by the parent in conjunction with the teacher, therapist, or other developmental specialist working with the child. It focuses on five major areas: (1) attention, (2) compliance, (3) expression, (4) comprehension, and (5) social awareness.

Parents' Needs Assessment Checklist. Contact: Ann Rivers, 9823 Lake Avenue #204, Cleveland, OH 44102

An assessment which covers the areas: (1) communication with professionals, (2) family living, (3) relief, (4) personal thoughts, (5) social activities, (6) other concerns, (7) education, and (8) future. The areas under these heading are answered by checking, not a problem, small problem, medium-sized problem, serious problems, very severe problems or NA.

6/K

Appendix H

Letters of Permission

Bowling Green State University

Department of Special Education
Bowling Green, Ohio 43403
Phone (419) 372-0151
Cable BGSUOH

100

March 1, 1984

Ms. Bonni H. Zetick
ARC/Rainbow
2350 Westmoreland
Philadelphia, PA 19140

Dear Ms. Zetick

I am following up on a phone conversation you had with Dan Leary last week. At that time, Dan explained that he was involved in a federal research project, Developing Individualized Parent Participation Programs (IPPP), which is designed to measure parent involvement.

For the past several months, I have been searching for an instrument which looks at how parents perceive their disabled child. I believe a tool developed by your project is most appropriate for the IPPP project.

At your request, I am asking for permission to use this tool for the IPPP project. Enclosed is a copy of the form. You also indicated that you would send us John Irwin's address. That information would also be greatly appreciated.

Thank you for your cooperation and permission.

Sincerely,

Colleen Mandell, Ed.D.
IPPP Project Director

CM/ds

encl.

The Association for Retarded Citizens

PHILADELPHIA CHAPTER - RAINBOW

2350 West Westmoreland Street • Philadelphia, Pennsylvania 19140

215-229-4550

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May 2, 1984

Colleen Mandell, Ed.D.
IPIP Project Director
Bowling Green State University
Department of Special Education
Bowling Green, Ohio 43403

Dear Dr. Mandell:

I am pleased that you are interested in using the Parent Attitude Scale developed by the PEERS Project. You are certainly welcome to use this instrument. We would appreciate your making the following citation with your use of the instrument:

PEERS Project

Special People in Northeast	&	ARC/RAINBOW
3201 Morrell Street		2350 W. Westmoreland St.
Philadelphia, PA. 19114		Philadelphia, PA. 19140

I am unable to supply you with John Irwin's address at this time. I will try to secure that information and forward it to you.

Best wishes in your research project. If I can be of further assistance, please do not hesitate to contact me.

Very truly yours,

Bonni H. Zetick, ACSW
Director, Motivating Agency

BHZ2/1f1

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Appendix I

Revised Parent Needs Assessment Inventory

FAMILY BACKGROUND DATA

Family Number 103
Date _____

Name of professional completing this form _____

1. Does family have phone? _____

2. Age of Mother: ___ 15-20 yrs. ___ 21-25 yrs. ___ 26-30 yrs.
___ 31-35 yrs. ___ 36-40 yrs. ___ over 40 yrs.

3. Mother's occupation: ___professional ___skilled laborer ___ unskilled laborer

4. Mother employed: ___ full-time ___ part-time ___ unemployed

5. Mother's health: ___ excellent ___ good ___ fair ___ poor ___ very poor

6. Mother's race: ___ American Indian ___ Asian ___ Black ___ Hispanic ___ White
___ Other _____

7. Age of Father: ___ 15-20 yrs. ___ 21-25 yrs. ___ 26-30 yrs. ___ 31-35 yrs.
___ 36-40 yrs. ___ over 40 yrs.

8. Father's occupation: ___ professional ___ skilled laborer ___ unskilled laborer

9. Father employed: ___ full-time ___ part-time ___ unemployed

10. Father's health: ___ excellent ___ good ___ fair ___ poor ___ very poor

11. Father's race: ___ American Indian ___ Asian ___ Black ___ Hispanic ___ White
___ Other _____

12. Siblings:

Age	Serious Medical Needs	Sex	Handicap	School age
___	___Yes ___No	M F	___Yes ___No	___pre ___elem ___jr.high ___post high
___	___Yes ___No	M F	___Yes ___No	___pre ___elem ___jr.high ___post high
___	___Yes ___No	M F	___Yes ___No	___pre ___elem ___jr.high ___post high
___	___Yes ___No	M F	___Yes ___No	___pre ___elem ___jr.high ___post high

13. How many children are enrolled in TPS/EC program? _____

14. Marital status of parents:
___ married ___ single ___ separated ___ divorced ___ widowed

15. Approximately how long has family lived at current address:
___ less than 6 months ___ 6 months to 1 yr. ___ more than one year

16. If applicable, has parent with whom child lives, remarried? ___yes ___no

17. With whom does the child live?
___ Natural mother and father
___ Natural mother only
___ Natural father only
___ Mother and stepfather
___ Father and stepmother
___ Foster parent(s)
___ Adoptive parent(s)
___ Maternal grandparent(s)
___ Paternal grandparent(s)
___ Other _____

18. Approximate socioeconomic level: ___ 0-10,000 ___10,000-15,000 ___15,000-20,000
___20,000-30,000 ___above 30,000

19. Does family receive public assistance? ___ Yes ___ No

20. Transportation availability: ___ Family has own car
___ Family relies on public transportation
___ Family relies on others for transportation
___ Transportation is rarely available

21. Language spoken in the home:
___ Standard English
___ Spanish
___ Non-standard/dialectal English
___ Other _____

22. Child's age now: ___0-1 ___1-2 ___2-3 ___3-4 ___4-5 ___5-6

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23. Type of disability:
___ Developmentally handicapped
___ Language impaired
___ Visually impaired
___ Multihandicapped
___ Otitis media
___ Emotionally disturbed
___ Physically handicapped
___ Hearing impaired
___ Other _____

24. Child's program is: ___AM ___PM ___Both ___Other _____

25. Child's program is: ___ daily ___parent education home visits
___ Other _____

26. How would you rate child's overall health?
___ excellent (rarely sick)
___ fair (frequent colds/infection)
___ very poor (frequently hospitalized or terminal disease)
___ good (occasional minor childhood ailments)
___ poor (chronic)

27. Are any other family members (i.e., those people who live in child's home on a regular basis) disabled? ___ Yes ___ No ___ Unknown
If yes, who _____ and disability _____

28. Nature of program:
___ Home base
___ Home base + center base
___ Self-contained special class at center
___ Mainstreamed into Head Start
___ Mainstreamed into regular preschool/day care

29. Who usually brings child to center base activities?
___Mother ___Father ___Stepmother ___Stepfather ___Grandparent(s)
___Friend ___Other _____ ___ Not applicable

30. Who usually works with parent educator in the home?
___Mother ___Father ___Stepmother ___Stepfather ___Grandparent(s)
___Friend ___ Other _____ ___Not applicable

31. How long has child been enrolled in TPS/EC program?
___less than 3 months ___family's second year ___family's fourth year
___3-6 months ___family's third year ___family's fifth year
___6-9 months

32. Who is the legal guardian? ___parent ___other _____

33. Is CSB involved with this family? ___No ___Yes How? _____

34. How does the child get to and from the program:
___parent drives ___parent/friend's carpool ___other _____
___cab ___bus

35. Does family receive services or participate in activities from other agency groups? ___Yes ___No If yes, which agencies? Circle the type of activities provided.

_____	counseling	education	financial	legal	social
_____	counseling	education	financial	legal	social

15/5

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FEELINGS ABOUT HAVING A HANDICAPPED CHILD

Here are some things other parents have said about how they feel or think. There are no right or wrong answers. Read each statement and check the column that best describe your feelings or thoughts.

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. I feel sorry for my special child.				
2. When I think about my special child, I feel happy.				
3. When I think about my special child, I feel proud.				
4. I do not feel self-conscious about my special child when I take him out.				
5. I am able to admit to myself that my child has a problem.				
6. When I think about my special child, I feel more governed by emotion than reason.				
7. Having a special child makes me feel good about myself				
8. Having a special child makes me feel sorry for myself.				
9. I do not feel angry that this had to happen to me (that my child had to have a problem.)				
10. I feel responsible for my child's having a problem.				
11. I feel confident in my role as a parent of a special child.				
12. I feel discouraged in my role as a parent of a special child.				
13. I feel satisfied in my role as a parent of a special child.				
14. I feel confused about what to do in my role as a parent of a special child.				
15. I feel alone in my role as a parent of a special child.				
16. I feel able to help my special child.				
17. As a parent of a special child, I feel pressured by many demands.				
18. I feel competent in my role as a parent of a special child.				
19. I feel able to carry on a normal life even though I have a special child.				
20. I feel hopeful about the future of my child who is special.				
21. I feel concerned about the future of my child who is special.				
22. I feel that my child will be independent in his/her adult years.				
23. Being the parent of a special child has made me easier to get along with.				
24. Being the parent of a special child has not made me change my plans to have more children.				
IF YOU DO NOT HAVE A SPOUSE, SKIP ITEMS 25-45 AND GO TO ITEM 46.				
25. I do not feel concerned about the effect of the special child on my marriage.				
26. I feel worried about my spouse's ability to cope with the fact that we have a special child.				
27. Being the parent of a special child has made my spouse harder to get along with.				
28. Being the parent of a special child has made my spouse change his/her plans to have more children.				
29. Being the parent of a special child has made my spouse feel different about her/himself.				

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	Strongly Agree	Agree	Disagree	Strongly Disagree
30. My spouse feels sorry for our special child.				
31. My spouse is uncomfortable with our special child.				
32. My spouse is able to admit to her/himself that our child has a problem.				
33. Being the parent of a special child has made my spouse more willing to participate in a program such as this.				
34. Being the parent of a special child has made my spouse more willing to participate in other contacts such as doctors' visits, therapy appointments, etc.				
35. Being the parent of a special child has made my spouse feel sorry for him/herself.				
36. My spouse is angry that this had to happen to him/her (that the child had to have a problem).				
37. Being the parent of a special child has made my spouse unable to carry on a normal life.				
38. I think my spouse's family understands my handicapped child.				
39. I think my spouse's family does not want to be around my handicapped child.				
40. I think my spouse is unkind to our handicapped child.				
41. I think my spouse feels comfortable around our handicapped child.				
42. I think my spouse does not want to be around our handicapped child.				
43. I think my spouse's family is kind to my handicapped child.				
44. I think my spouse understands our handicapped child.				
45. I think my spouse's family is comfortable around my handicapped child.				
46. I think my friends feel comfortable around my handicapped child.				
47. I think my family is unkind to my handicapped child.				
48. I think my friends do not understand my handicapped child.				
49. I think my family understands my handicapped child.				
50. I think my friends do not want to be around my handicapped child.				
51. I think my family does not want to be around my handicapped child.				
52 I think my friends are kind to my handicapped child.				
53. I think my family feels uncomfortable around my handicapped child.				
IF YOU HAVE OTHER CHILDREN, PLEASE RESPOND TO THE FOLLOWING.				
54. Being the parent of a special child has made me worry that I will not have enough time for my other children.				
55. I am concerned about the effects the special child will have on my other children.				
56. My other child is unaffected by the "specialness" of our child.				
57. My other child is comfortable with the special child.				
58. Having a special brother/sister has made my child happy.				
59. My other child is totally accepting of the special child.				

15/5

Toledo Public Schools/Early Childhood
Educational Program Rating Scale

What is your relationship to the child? (check one)

____ Mother ____ Stepmother ____ Stepfather ____ Other _____

____ Father ____ Foster parent ____ Grandparent (which one) _____

Following are some statements about how satisfied you are with your child's educational program. Check the response that best describes how satisfied you are. Please respond to all the statements.

	Very Satisfied	Satisfied	Not Satisfied	Not at all Satisfied
1. The overall program in general				
2. The teaching methods used				
3. The effectiveness of the staff				
4. The frequency of contact with teachers				
5. Learning materials used				
6. Parent involvement activities available to you				
7. The staff's willingness to include you in learning activities				
8. Assessment procedures used				
9. Methods of monitoring your child's progress				
10. Accomplishments of the program				
11. Your level of involvement in the program				
12. Opportunities for your suggestions				
13. The IEP meeting				

15/5

INVOLVEMENT IN COMMUNITY RESOURCES

Below are three statements describing times when you might be with other people. Read each statement and then check how often you are with each group of people.

Very often - 1 to 2 hours daily
Often - several hours weekly
Occasionally - several hours every month
Rarely - not at all or less than once or twice a year

1. WHEN YOU WANT MORE INFORMATION ABOUT YOUR CHILD'S HANDICAP, WHERE DO YOU GO?	Very Often	Often	Occasionally	Rarely
To friends who have handicapped children				
To other family members				
To friends who do not have handicapped children				
To minister, priest or rabbi				
To agencies that serve handicapped children				
To people at the Toledo Public Schools				
To people at Head Start				
To medical or health care people				
To university or college professors				

2. WHO DO YOU TURN TO FOR HELP?	Very Often	Often	Occasionally	Rarely
To friends who have handicapped children				
To other family members				
To friends who do not have handicapped children				
To minister, priest or rabbi				
To agencies that serve handicapped children				
To people at the Toledo Public Schools				
To people at Head Start				
To medical or health care people				
To university or college professors				

3. WHERE DO YOU AND YOUR FAMILY GO FOR SOCIAL GATHERINGS?	Very Often	Often	Occasionally	Rarely
To friends who have handicapped children				
To other family members				
To friends who do not have handicapped children				
To minister, priest or rabbi				
To agencies that serve handicapped children				
To people at the Toledo Public Schools				
To people at Head Start				
To medical or health care people				
To university or college professors				

Appendix J

Correspondence with TPS/EC Families

Bowling Green State University

Department of Special Education
Bowling Green, Ohio 43403
Phone: (419) 372-0151
Cable: BGSUOH

Dear Parents:

This year I have been working on a project with the Toledo Public Schools Early Childhood program. This project is funded by the Office of Education and has been approved by the Toledo Public Schools.

The purpose of this project is to help professionals plan individualized programs for families who have young children with special needs. In order to develop more realistic family programs, I need your help.

There is a lot of information. Other families, like yourself, have completed these surveys. They said that it only took them about 15 to 25 minutes to answer all the questions.

As you read the survey you will notice that the term "handicapped" is used. This term may be inaccurate if your child is enrolled in the diagnostic program. Since the surveys were developed by other programs, the wording on them cannot be changed.

You can help me by answering all the items on the enclosed survey. Please return all the surveys within a week in the enclosed stamped envelope. Your opinions are important and I hope you take time to complete this survey.

All of your responses will be confidential. At no time will the professionals working with you on your child see this information.

If you have any questions about this project, please call me at (419) 372-0151 at Bowling Green State University. I would be glad to talk about the project and survey with you.

Thank you very much.

Sincerely,

Colleen Mandell
Project Director

15/5
Enclosures

Bowling Green State University

Department of Special Education
Bowling Green, Ohio 43403
Phone: (419) 372-0151
Cable: BGSUOH

March 30, 1983

Dear Parents,

Several weeks ago I sent you a letter and asked you to help me with a project. The purpose of this project is to help professionals plan better programs for families who have young children with special needs.

So far, about 60 families have returned the surveys. But, I need your responses, too. This is a busy time, but I hope you will complete the enclosed surveys. Please use the stamped envelope and return the surveys within a week.

Thank you again.

Sincerely,

Colleen Mandell
Project Director

CM/ds

encls.